Y 1.1/2:SERIAL 14649
United States Congressional Ser

106th Congress — 2d Session • January 24–December 15, 2000

House Document

No. 269

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FINANCIAL DISCLOSURE REPORTS
MEMBERS OF HOUSE OF REPRESENTATIVES
JANUARY 1–DECEMBER 31, 1999
VOLUME 2 OF 3

United States Congressional Serial Set

Serial Number 14649

United States Government Printing Office
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106th Congress, 2d Session - - - - - - - - - - - - - House Document 106–269

FINANCIAL DISCLOSURE

REPORTS

OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES

FOR THE PERIOD BETWEEN

January 1, 1999 to December 31, 1999

COMMUNICATION FROM THE CLERK OF THE HOUSE

TRANSMITTING

THE ANNUAL COMPILATION OF PERSONAL FINANCIAL DISCLOSURE STATEMENTS AND AMENDMENTS THERETO FILED WITH THE CLERK OF THE HOUSE OF REPRESENTATIVES, PURSUANT TO RULE XXVII, CLAUSE 1, OF THE HOUSE RULES

(Volume 2 of 3)

JULY 19, 2000.—Referred to the Committee on Standards of Official Conduct and ordered to be printed

U.S. GOVERNMENT PRINTING OFFICE

65-597 WASHINGTON : 2000

LETTER OF SUBMITTAL

OFFICE OF THE CLERK,
HOUSE OF REPRESENTATIVES,
Washington, DC, July 19, 2000.

Hon. J. DENNIS HASTERT,
The Speaker, The Capitol,
House of Representatives, Washington, DC.

DEAR MR. SPEAKER: I hereby submit the annual compilation of personal financial disclosure statements filed with the Clerk of the House of Representatives pursuant to the Ethics in Government Act of 1978, as amended, 5 U.S.C. app. § 101–111 (1994), and the House Rule XXVII.

This compilation contains the personal financial disclosure statements and amendments thereto required to be filed by Members of the House pursuant to the Act and House Rule XXVII by May 15, 2000. The compilation includes reported financial transactions which occurred between January 1, 1999 and December 31, 1999.

House Rule XXVII provides that the annual compilation of reports filed with the Clerk be printed as a House document by August 1 and contain all such reports filed by Members within the period beginning January 1 and ending June 15 of each year. This compilation is submitted accordingly.

With best wishes, I am

Sincerely,

JEFF TRANDAHL,
Clerk, House of Representatives.

Enclosures.

FINANCIAL DISCLOSURE STATEMENT — CALENDAR YEAR 1999

00 APR 27 PM 12:44

OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(9)

John Gregory GANTKE, M.D. (Full Name)	
5206 Waterbury Rd, Des Moines, Iowa 50312 (Mailing Address)	Daytime Telephone 515 277-4886

MC APR 17 2000 (Office Use Only)

Filer Status	[✓] Member of the U.S. House of Representatives	State: IA District: 4th	[ ] Officer or Employee	Employing Office
Report Type	[✓] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [✓] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [✓]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [✓]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [✓]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [✓] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [✓]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [✓] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [✓]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [✓]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [✓]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [✓]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Greg Gantke	4/17/00

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Name	John Gregory GANSICK	Page 2 of ___

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Corrine GANSICK MD medical practice, Fine hearing Services	Salary, spouse	N.A.

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb 2, 1999	$2,000
Examples: XYZ Magazine	Article	Aug 13, 1999	$500
NONE			

This page may be copied if more space is required.

Name John Gregory GANSKE | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT — *Examples:* SP — Mega Corp Stock		F X	DIVIDENDS X	IV $1,001 – $2,500 X	P
Examples: Simon & Schuster		Indefinite	Other Type of Income: Royalties	IX $100,001 – $1,000,000 X	
Examples: 1st Bank of Paducah, KY accounts		F X	INTEREST X	VI $5,001 – $15,000 X	
St Joe Company		F X	DIVIDENDS X	V $2,501 – $5,000 X	
Central Fund CDN LTD		F X	DIVIDENDS X	III $201 – $1,000 X	
IRA Vanguard Windsor Fund		D X	DIVIDENDS X; CAPITAL GAINS X	V $2,501 – $5,000 X	
IRA Vanguard Incm - 500		F X	DIVIDENDS X; CAPITAL GAINS X	IV $1,001 – $2,500 X	
Keogh - Janus Twenty		G X	DIVIDENDS X; CAPITAL GAINS X	V $2,501 – $5,000 X	
Keogh - Mutual Shares		F X	DIVIDENDS X; CAPITAL GAINS X	VI $5,001 – $15,000 X	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John Gregory GANSKE

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Fidelity Growth Fund								X					X			X								X							
	Dreyfus Gov. Gov't							X								X											X					
	Keogh – Vanguard Windsor II						X							X		X											X					
	Keogh – Schwab S&P 500							X						X		X										X						
	Keogh – Schwab Gov't Money						X									X										X						
	Farmland – 150 acres Iowa							X							X												X					
	Checking account Norwest Bank IA			X												X																
	Conway Store Stock			X										X										X								
SP	Keogh – Schwab						X							X			X										X					
SP	IRA – Fidelity						X							X			X										X					
SP	IRA – Vanguard Windsor						X							X			X															
SP	TSA – Equivest					X								X			X									X						
SP	Savings – Norwest			X												X								X								
SP	Checking – Norwest			X																	X											
DC	Trust – Hawkins Trust								X					X		X												X				
	Norwest Brokerage:																															
SP	Fidelity Adv Growth			X										X			X						X									
SP	Vanguard S&P 500 Index				X									X			X							X								
SP	Norwest Adv Cash					X										X									X							

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SCHEDULE IV — TRANSACTIONS

Name John Gregory GANSKE

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Pfizer		X		12/21/99				X						
	Fidelity Growth	X			12/21/99				X						
	General Govt		X		12/21/99			X							
	Vanguard S&P 500	X			12/21/99			X							

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Name John Gregory GANSKE | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	None - People for GANSKE campaign											
	repaid last loan to Bankers Trust											
	which had been personally guaranteed											
	by me.											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	none						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
none	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	none	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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U.S. HOUSE OF REPRESENTATIVES
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Samuel Gejdenson
(Full Name)

2304 Rayburn Building, Washington, DC 20515
(Mailing Address)

(860) 823-8212
Daytime Telephone

Filer Status	[x] Member of the U S House of Representatives	State CT District 2	[ ] Officer or Employee	Employing Office
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [x]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [x]
V Did you, your spouse or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [x]	No [ ]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [x]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief		5/5/00

1852

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Joseph Cohn and Son, Inc.	Spouse Benefits	NA
	United Illuminating	Spouse Director Fee	NA
	Birmingham Utilities	Spouse Salary	NA
	Aristotle Corporation	Spouse Director Fee	NA
	Citizens Bank	Spouse Director Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	None			

This page may be copied if more space is required.

Name Samuel Gejdenson | Page 4 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction (P, S, E)
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X								X										X								P
			Simon & Schuster	Indefinite																	Royalties									X			
			1st Bank of Paducah, KY accounts					X									X										X						
	110 3rd St, NE																																
	Washington, DC								X							X						X											

For additional assets and unearned income, use next page.

Name Samuel Gejdenson

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	None														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Mellon Mortgage Co.	Mortgage on 110 3rd St			x							
		Washington, DC										
	Wright Patman Cong.Fed. Credit	Credit overdraft		x								
	Union											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Center for Middle East Peace & Economic Cooperation	2/13-19 1999	New York City - Syria-Jordan-Israel-New York	Y	N	N	

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 17 AM 8:49
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC MAY 12 2000
(Office Use Only)

GEORGE W. GEKAS
(Full Name)

732 SOUTH 25TH ST.
HARRISBURG, PA 17111
(Mailing Address)

Daytime Telephone 202-225-4315

Filer Status	[X] Member of the U.S. House of Representatives	State PA District 17th	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	5/12/00

Name GEORGE W. GEKAS	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	GORDON D. MYERS, M.D.	SPOUSE SALARY	NA
	THE PENNSYLVANIA STATE UNIVERSITY	SPOUSE SALARY	NA
	COMMONWEALTH OF PENNSYLVANIA STATE EMPLOYES' RETIREMENT SYSTEM	LEGISLATIVE PENSION	16,641

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction P, S, E
SP	Examples: Mega Corp Stock			Indefinite		X								X						Royalties				X								P
	Simon & Schuster																												X			
	1st Bank of Paducah, KY accounts						X									X									X							
(1)	ALL FIRST BANK Baltimore MD (IRA)				X											X									X							P
SP	PRUDENTIAL SECURITIES (IRA) New York, NY (See Exhibit A)							X						X			X						NA - IRA									P
SP	DIVERSIFIED INVESTMENT ADVISORS, Purchase, NY (IRA)			X												X							NA - IRA									
	CONGRESSIONAL FEDERAL CREDIT UNION, WASHINGTON, DC			X												X						X										
(1)	ALL FIRST BANK Baltimore, MD				X											X							X									
	MID PENN BANK Millersburg, PA					X										X									X							

For additional assets and unearned income, use next page.

(1) FORMERLY FIRST NATIONAL BANK OF MARYLAND

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name GEORGE W GEKAS

	SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
		HARRIS SAVINGS ASSOCIATION HARRISBURG, PA						X									X									X							
		US SAVINGS BONDS "EE"						X									X									X							S
		INVESCO FUNDS GROUP INC. DENVER CO			X										X			X					X										
(1)	SP	ALLFIRST BANK BALTIMORE, MD	X														X						X										S
	SP	124 BOAS STREET HARRISBURG PA					X									X											X						
	SP	INTEREST IN ESTATE OF LOUIS CHARLES (SEE SCHEDULE A)						X													NONE	X											
	SP	LAWRENCE BANK Camp Hill, PA		X													X						X										
	JT	PNC BANK Camp Hill PA			X														N/A			X											
		MERIDIAN BANK READING PA	X																N/A			X											S
	SP	US SAVINGS BONDS			X												X					X											

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Name GEORGE W. GEKAS

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	AllFirst Bank (IRA)	X			4.15.99	X									
	US Savings Bonds "EE"		X		9.8.99	X									
	US Savings Bonds "EE"		X		11.10.99	X									
SP	Prudential Securities (IRA)														
	Aim Equity Funds, Inc. Charter Fund	X			12.20.99	X									
	Aim Equity Funds, Inc. Constellation Fd	X			12.20.99	X									
	Phoenix Balanced Fund	X			12.27.99	X									
	↓ Prudential Money Market Asset Fund	X			12.23.99	X									
	Meridian Bank		X		1.1.99	X				Closed					
SP	AllFirst Bank		X		1.1.99	X				Closed					

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Name GEORGE W. GEKAS | Page 6 of 7

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
(2) JT	VARTAN NATIONAL BANK, HARRISBURG, PA	BLANKET MORTGAGE ON: 732 S. 25TH ST., HBG, PA			X							
	}	313 S. 31ST ST., HBG, PA 124 BUAS ST., HBG, PA										

(2) FORMERLY DAUPHIN NATIONAL BANK

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

GEORGE W. GEKAS
FINANCIAL DISCLOSURE STATEMENT:1999

Exhibit A

Schedule III - Assets
Prudential Securities - Spouse - IRA

Assets related to the IRA account on December 31, 1999:

	Value
AIM Equity Funds, Inc. - Charter Fund	$ 100,001 - $ 250,000
AIM Equity Funds, Inc. - Constellation Fund	$ 15,001 - $ 50,000
Phoenix Balanced Fund	$ 15,001 - $ 50,000
Prudential Jennison Growth Fund, Inc. - Class A	$ 15,001 - $ 50,000
Prudential Moneymart Asset Fund (Cash)	$ 1,001 - $ 15,000

Exhibit B

Schedule III - Assets
Interest in Estate of Louis Charas - Assets within the Estate

	Value
732 S. 25th Street, Harrisburg, PA - House	$ 50,001 - $ 100,000
313 S. 31st Street, Harrisburg, PA - House	$ 50,001 - $ 100,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CLERK'S OFFICE CENTER
00 MAY 15 PM 5:16
OFFICE OF THE CLERK

Richard A. Gephardt
(Full Name)

H-204 The Capitol
(Mailing Address)

Washington, DC 20515

Daytime Telephone
(202) 225-0100

HAND DELIVERED (7)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives — State: MO District: 03	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Richard A. Gephardt	5-15-2000

Name Richard A. Gephardt	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Northen Virginia Medical Association	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP		SP	Mega Corp Stock					X							X										X								P
DC	*Examples.*		Simon & Schuster		Indefinite																Royalties									X			
JT			1st Bank of Paducah, KY accounts					X									X									X							
JT	Vanguard Growth and Income Fund				X																	X											
JT	Reynolds Blue Chip Growth Fund				X																	X											
JT	Vanguard 500 Index Fund				X										X			X					X										
JT	Janus Fund					X									X			X							X								
JT	Janus Mercury Fund				X										X			X						X									

For additional assets and unearned income, use next page.

1869

Name Richard A. Gephardt

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	Reynolds Blue Chip Growth Fund	X			5-3-99	X									
JT	Vanguard 500 Index Fund	X			5-3-99	X									
JT	Janus Fund	X			11-22-99	X									
JT	Janus Mercury Fund	X			11-22-99	X									

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Northwestern University	Student Loan		X								
JT	First Tennessee Bank	Student Loan			X							
JT	General American Life Ins. Co.	Loan on Life Ins. Policy		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
AFL-CIO	Feb. 16-18	Miami -- Washington, DC	Y	N	Y	N
Louisiana AFL-CIO	Mar. 8-9	NYC -- Baton Rouge -- Washington, DC	Y	N	N	N
Suffolk Law School	May 22	Boston (no transportation)	Y	N	N	N
Assoc. of Trial Lawyers of Amer.	July 17-18	Washington, DC--San Francisco -- Washington, DC	Y	N	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Institute Board	Public Policy School, Duke University (uncompensated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees.

00 MAY 11 PM 12:04

OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC

(Office Use Only) 6

JAMES ARTHUR GIBBONS
(Full Name)

(Mailing Address)

(775) 851-4266
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State: Nevada District: 2	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James A. Gibbons	May 11, 2000

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Dewnig Syndicate, Inc.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name James Gibbons | Page 2 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: Dividends	Rent	Interest	Capital Gains	Excepted Trust	Qualified Blind Trust	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts					X									X									X							
JT	US Bancorp				X												X							X									
	Dean Witter IRA*							X																NA									
SP	Dean Witter IRA*						X																	NA									
	Delta Family Care Savings						X																	NA NOT SELF DIRECTED									
	3 vacant lots, Washoe County, Nevada							X														X											

For additional assets and unearned income, use next page.

* rolled over from US Bank IRA.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name James Gibbons

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	1) Wedekind Rel. = 1.17 ac																															
	2) Northern Washoe County																															
	Parcel 1 = 320 ac																															
	Parcel 2 40 ac																															
	(all unimproved & vacant)																															
JT	Dean Witter (variable annuity)				X									X			X				X											
	US Bank of NV			X												X						X										
DC	US Bank of NV			X												X						X										
DC	Dean Witter Investments;																															
	Coca Cola Stock		X											X								X										
	Intel Corp. Stock			X										X								X										
	US Treasury Zero Coupon Bonds				X											X								X								
DC	Dean Witter Holdings;																															
	European Growth Fund			X										X			X							X								
	Global Dividend Growth			X										X			X							X								
	American Value Fund			X										X			X						X									
	Dividend Growth Fund				X									X			X							X								
DC	State Farm - Universal Life				X																X											
	Policies (Policies in irrevocable																															
	trust to benefit dependent child)																															
	Delta Pension					X																N/A NOT SELF DIRECTED										
	Dean Witter MM			X												X					X											

This page may be copied if more space is required.

Name James Gibbons | Page 4 of 5

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
DC	Mandated redemption of Dean Witter Digital Equip. Preferred Stock		X		4-1-99	X									

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1-1-99	Delta Pension Benefits	Monthly Withdrawal of $504.00
1-1-99	Travelers Pension (Delta)	Monthly Withdrawal of $161.93

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 16 AM 10: 11
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

Wayne T Gilchrest
(Full Name)

13501 Turners Creek Road, Kennedyville, Md., 21645 410-348-2018
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: Maryland District: First	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Wayne T. Gilchrest	May 15, 2000

1880

Name Wayne T Gilchrest

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock					X							X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
JT	Peoples Bancorp				X												X							X									
SP	Peoples Bancorp				X												X							X									
JT	Morgan Stanley Dean																																
	Witter Money Market				X												X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: Wayne T Gilchrest

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
Inherited listed securities					
JT	A T & T	C	DIVIDENDS		
JT	Bell Atlantic	D	DIVIDENDS		
JT	CBS Corp	C	DIVIDENDS	All listed securities are held in street name with Morgan Stanley Dean Witter & Co. All dividends are paid directly to them. They filed a 1999 form 1099 for the Gilchrests in the range of $2,501 - $5,000.	
JT	Consumers Financial	C	DIVIDENDS		
JT	Dominion Resources	C	DIVIDENDS		
JT	General Motors	C	DIVIDENDS		
JT	GTE	C	DIVIDENDS		
JT	Lucent Technologies	C	DIVIDENDS		
JT	NCR Corporation	B	DIVIDENDS		
JT	Nuveen Mun Value Fund	C	DIVIDENDS		
JT	Potomac Electric	C	DIVIDENDS		
JT	Raytheon Corp	B	DIVIDENDS		
JT	SBC Communications	C	DIVIDENDS		
JT	Wash Gas Light Co	C	DIVIDENDS		
JT	Alliance Services	C	DIVIDENDS		
JT	Delphi Automotive	C	DIVIDENDS		

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Paul E. Gillmor
(Full Name)

7750 North County Road 51; P.O. Box 123
(Mailing Address)

Old Fort OH 44861

Daytime Telephone: 202-225-6405

Filer Status	[X] Member of the U.S. House of Representatives	State: OH District: 05	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Paul E. Gillmor	May 15, 2000

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Ohio	Spouse salary	NA
	Public Employees Retirement System of Ohio	Pension	$40,468.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year For rental property or land, provide an address Provide full names of any mutual funds. For a self-directed IRA (i e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Cooker Restaurants - stock	$15,001 - $50,000	Dividends	$201 - $1,000	
	Matlack, Inc - stock	$1,001 - $15,000	Dividends	None	
	Rollins Truck Leasing - stock	$250,001 - $500,000	Dividends	$5,001 - $15,000	
	Max & Erma's Restaurants - stock	$15,001 - $50,000	Dividends	None	
	Safety Kleen - stock	$50,001 - $100,000	Dividends	None	
	Industrial Bancorp - stock	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Price New Horizons - mutual fund	$50,001 - $100,000	Capital Gains	$1,001 - $2,500	P
	Dealers Alliance - stock	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	Gillmor Financial Services - stock	$5,000,001 - $25,000,000	Dividends	$50,001 - $100,000	
	Paul M. Gillmor Company - stock	$250,001 - $500,000	Dividends	$5,001 - $15,000	
	EZ Color - stock	$50,001 - $100,000	Dividends	None	
	Bayshore Leasing - stock	$50,001 - $100,000	Dividends	None	
	National Research Corporation - stock	$1,001 - $15,000	Dividends	None	
	Gillmor Family Partnership	$15,001 - $50,000	Interest	$201 - $1,000	
	First Star (formerly Solar Cells) - stock	$15,001 - $50,000	Dividends	None	
	Old Fort Bank account	$1,001 - $15,000	Interest	$201 - $1,000	
	Old Fort Bank IRA account	$15,001 - $50,000	Interest	$1,001 - $2,500	
	Charles Schaub & Co margin account	None	Interest	$1 - $200	
	Congressional Credit Union account	$1,001 - $15,000	Interest	$1 - $200	
	David Phillips note	$15,001 - $50,000	Interest	$1,001 - $2,500	
	Thermocolor note	$100,001 - $250,000	Interest	$1,001 - $2,500	
	First Federal account	$1,001 - $15,000	Interest	$1 - $200	
	DeNovo Corporation - stock	$1,001 - $15,000	Dividends	None	
SP	Old Fort Bank IRA account	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	American General - stock	$15,001 - $50,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Northwest Natural Gas - stock	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	Southwest Natural Gas - stock	$1,001 - $15,000	Dividends	$1 - $200	
SP	T. Rowe Price funds	$15,001 - $50,000	Interest	$201 - $1,000	
SP	Ohio Public Employees Comp Program	$50,001 - $100,000	Dividends	$2,501 - $5,000	
SP	Star Bank savings	$1,001 - $15,000	Interest	$201 - $1,000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	America Online - stock	Purchase	3-2-99	$1,001 - $15,000
	America Online - stock	Sold	4-26-99	$1,001 - $15,000
	Natl Research Corp - stock	Purchase	9-7-99	$1,001 - $15,000
	Price New Horizons - mutual fd	Purchase	12-26-99	$1,001 - $15,000

Name Paul E. Gillmor	Page 7 of 9

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Charles Schaub & Company	broker margin account	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. **Exclude:** Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce Mega Corporation	Mar.2 Aug.6-13	Wash., D.C.-Chicago-Wash., D.C. Wash., D.C.-Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
Consumer Electronics Manufacutrers Association	1/8/99-1/10-99	Wash, DC - Las Vegas, NV - Wash, DC	Y	Y	Y	NA

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Director	Gillmor Financial Services
Director	Old Fort Banking Company
Director	E-Z Color
Director	Bayshore Leasing
Trustee	Paul M. & Lucy J. Foundation
Director	DeNovo Corporation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

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Benjamin A. Gilman
(Full Name)

2449 Rayburn House Office Buildong
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202 225 3776

Filer Status	[X] Member of the U.S. House of Representatives	State: NY District: 20	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	B. Gilman	5/9/2000

UNITED STATES HOUSE OF REPRESENTATIVES

Form A
For use by Members, officers, and employees

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	New York State Pension	Retirement	$12094.00
	Coney Island Food Service Management	Spousal Self Employment	$3082.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II – PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	K-Mart Corporation	Kids Race Against Drugs	Sept 22, 1999	$500.00

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
First Federal Savings Bank, Middletown, New York	$15,001 - $50,000	Interest	$1,001 - $2,500	NA
Congressional Federal Credit Union	$50,001 - $100,000	Interest	$2,501 - $5,000	NA
16 Orchard Street, Middletown, New York Commercial/Half Residentaial	$15,001 - $50,000	Rent	$2,501 - $5,000	NA
Northwestern Mutual Life, Milwaukee, WI	$1,001 - $15,000	Annuity	$1,001 - $2,500	NA
Congressional Federal Credit Union, Washington, DC - IRA ACCOUNT	$15,001 - $50,000	Distribution	$1,001 - $2,500	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Dow Target Fund	None	Capital Gains	$1 - $200	S
	Pilgrim Fund Bank and Thrift	None	Dividends	$201 - $1.000	S
	Nuveen Sector Technology	$15.001 - $50.000	None	None	P
	Pilgrim Fund Large Cap	$15.001 - $50.000	None	None	P
SP	Central Hudson Gas & Electric	$1.001 - $15.000	None	None	NA
SP	MCI Telecommunications	$15.001 - $50.000	None	None	NA
SP	Sale of Business to John Daskalis/DBA Middletown Coney Island Food Service Management, Middletown, NY	$250.001 - $500.000	Installment Payment on Sale	$15.001 - $50.000	NA
SP	Condo-Island Club, 10410 So. Ocean, Jensen Beach, Florida	$100.001 - $250.000	Rent	$5.001 - $15.000	NA

Name	Benjamin A. Gilman	Page 6 of 9

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Pilgrim Bank & Thrift	Sold	Sept. 24, 1999	$15,001 - $50,000
	Pilgrim Large Cap	Purchase	Sept. 24, 1999	$15,001 - $50,000
	Dow Target	Sold	Dec. 30, 1999	$15,001 - $50,000
	Nuveen Sector Technology	Purchase	Dec. 30, 1999	$15,001 - $50,000

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
SP	Orange County Trust, Middletown, NY	Mortgage on 14 Railroad Avenue, Middletown NY-Part of the sale of Business (See schedule III)	$100,001-$250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Ross University	Feb. 17-20, 1999	New York-Puerto Rico-Dominica -Miami-New York	Y	Y	Y	None
American Israel Public Affairs Committee	March 7-8, 1999	New York-Boca Raton, Fl, Wash, DC	Y	N	Y	None
Carribbean Latin American Action	Dec. 9-10, 1999	Wash, DC-Miami, Fl-New York	Y	N	Y	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Member, Board of Directors	World Hunger Year
Member, Board of Directors	American Friends of the Shakespeare Birthplace Trust

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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HAND DELIVERED
(Office Use Only)

(16)

CHARLES A. GONZALEZ
(Full Name)

151 E. LULLWOOD AVE.
(Mailing Address)

SAN ANTONIO, TX 78212

Daytime Telephone
(202) 225-3236

Filer Status: [X] Member of the U S House of Representatives — State: TX District: 20 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**		X
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**		X
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Charles A. Gonzalez	05-15-00

1901

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb 2, 1999	$2,000
XYZ Magazine	Article	Aug 13, 1999	$500
NONE			

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Name CHARLES A. GONZALEZ

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A	Block B	Block C	Block D	Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
	STATE OF TEXAS				X											X									N/A							
	COUNTY OF BEXAR				X											X									N/A							
SP	VAN KAMP PACE - IRA																															
	MUTUAL FUNDS				X									X		X								X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHARLES A. GONZALEZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	AIRTOUCH STOCK	X															X									X						S
SP	ALCOA INC STOC	X															X									X						S
SP	AMER INTL GROUP STOCK	X															X										X					S
SP	AVATAR HLDGS STOCK	X															X															S
SP	BERKSHIRE HATHAWAY STOCK	X																							X							S
SP	CANADIAN PACIFIC STOCK	X															X									X						S
SP	CENTL SOWEST STOCK	X															X									X						S
SP	COMCAST CORP STOCK	X															X										X					S
SP	COMPAQ COMPUTER STOCK	X															X									X						S
SP	DPL INC STOCK	X															X									X						S
SP	EQUITY OFFICE STOCK	X															X									X						S
SP	ALLTEL CORP STOCK	X															X										X					S
SP	GENZYME CORP STOCK		X														X							X								S
SP	INGRAM MICRO STOCK	X															X								X							S
SP	INTEL CORP STOCK				X												X									X						S
SP	INTL BUS MACH STOCK		X														X									X						S
SP	MCI WORLDCOM STOCK	X															X										X					S
SP	MATTEL INC STOCK	X															X									X						S
SP	NOBLE AFFILIATES STOCK	X															X								X							S
SP	SIMON PROPERTY STOCK	X															X									X						S
SP	SMITHLINE BCHM STOCK	X															X										X					S
SP	TIME WARNER STOCK	X															X									X						S

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHARLES A. GONZALEZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	TEXAS UTILS STOCK	X														X									X						S
SP	UNION PAC RES GRP STOCK	X														X							X								S
SP	VORNADO REALTY STOCK	X														X									X						S
SP	VISHAY INTRTECH STOCK	X														X									X						S
SP	CENTL SOWEST CORP STOCK	X											X									X									
SP	EQUITY OFFICE STOCK	X											X										X								P
SP	GTE CORP STOCK	X											X										X								
SP	PARTNER RE LTD STOCK		X										X										X								
SP	SIMON PROP GROUP STOCK	X											X										X								P
SP	TX UTILS STOCK	X											X										X								
SP	ML GLOBAL ALLOC MUTUAL FUND					X							X												X						
SP	CMA MONEY MARKET FUND					X							X													X					
JT	CMA MONEY MARKET FUND		X										X										X								
DC	AIM WEINGARTEN FUND			X									X										X								
SP	BILLING CONCEPTS STOCK			X																X											
SP	QWEST COMM INTL STOCK			X																X											
SP	AK STEEL HOLDING CO STOCK			X																X											P
SP	AUTONATION INC STOCK			X																X											P
SP	ACE LTD STOCK			X																X											P
SP	AMER HOME PRODUCTS			X																X											P
SP	AMSOUTH BANCORP STOCK			X																X											P
SP	BORG WARNER STOCK			X																X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHARLES A. GONZALEZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	BECKMAN COULTER STOCK			X																	X											P
SP	BIOCHEM PHARMA STOCK			X																		X										P
SP	BURLINGTON RESOURCES STK			X																		X										
SP	CIT GROUP STOCK			X																		X										
SP	CITIGROUP INC STOCK			X																		X										P
SP	DELPHI AUTOMOTIVE STOCK			X																												P
SP	ELECTRONIC DATA SYS STOCK			X																		X										P
SP	EOG RESOURCES STOCK			X																		X										P
SP	FANNIE MAE STOCK			X																		X										
SP	GTE CORP STOCK			X																		X										
SP	GLAXO WELLCOME STOCK			X																		X										
SP	GENERAL MOTORS STOCK			X																		X										P
SP	HEALTHPLAN SVCS STOCK		X																			X										P
SP	HEINZ CO STOCK			X																		X										P
SP	MEDIAONE GROUP STOCK			X																		X										P
SP	NCR CORP STOCK			X																		X										P
SP	PREMIER PARKS STOCK			X																		X										
SP	ROBERT HALF INTL STOCK			X																		X										P
SP	SAKS INC TENN STOCK			X																		X										P
SP	SPRINT CORP STOCK			X																		X										P
SP	TENET HEALTHCARE STOCK			X																		X										
SP	TEXACO INC STOCK			X																		X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHARLES A. GONZALEZ

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	US WEST INC STOCK			X																	X										P
SP	UNOCAL CORP STOCK			X																	X										
SP	WASHINGTON MUTUAL STOCK			X																	X										P
SP	XL CAPITAL LTD STOCK			X																	X										P
SP	WARNACO GROUP STOCK			X																	X										P
SP	WARNR LAMBERT CO STOCK			X																	X										P
SP	NAVISTAR STOCK			X																	X										P

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SCHEDULE IV — TRANSACTIONS

Name CHARLES A. GONZALEZ

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	AIRTOUCH COMMUNICATIONS COMMON STOCK		X		1-26-99 & 5-19-99		X								
SP	ALCOA INC COMMON STOCK		X		7-6-99	X									
SP	ALLTEL CORP COMMON STOCK		X		6-18-99 & 7-14-99		X								
SP	AMER INTL GROUP COMMON STOCK		X		2-19, 8-17, 8-26-99	X									
SP	AVATAR HLDGS INC COMMON STOCK		X		5-7-99	X									
SP	BERKSHIRE HATHAWAY CLB COMMON STOCK		X		1-20-99 & 7-1-99	X									
SP	CANADIAN PACIFIC COMMON STOCK		X		2-12-99	X									
SP	CENTL SOWEST CORP COMMON STOCK		X		6-15-99	X									
SP	COMCAST CORP COMMON STOCK		X		1-19, 6-23, 7-15-99		X								
SP	COMPAQ COMPUTER CORP COMMON STOCK		X		10-22-99	X									
SP	DPL INC COMMON STOCK		X		5-25-99	X									
SP	EQUITY OFFICE COMMON STOCK		X		12-1-99	X									
SP	GENZYME CORP COMMON STOCK		X		7-26-99 & 9-9-99	X									
SP	INGRAM MICRO INC COMMON STOCK		X		3-30-99	X									
SP	INTEL CORP COMMON STOCK		X		9-1-99 & 9-8-99	X									
SP	INTL BUSINESS MACH COMMON STOCK		X		6-21, 8-16, 9-9-99	X									

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SCHEDULE IV — TRANSACTIONS

Name CHARLES A. GONZALEZ

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SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	MCI WORLDCOM COMMON STOCK		X		7-15-99		X								
SP	MATTEL INC COMMON STOCK		X		10-4-99	X									
SP	NOBLE AFFILIATES COMMON STOCK		X		5-3-99	X									
SP	SIMON PROPERTY GROUP COMMON STOCK		X		11-2-99	X									
SP	SMITHLNE BCHM COMMON STOCK		X		1-19-99 & 10-6-99	X									
SP	TIME WARNER INC COMMON STOCK		X		3-18-99	X									
SP	TEXAS UTILS COMMON STOCK		X		8-26-99	X									
SP	UNION PAC RES GROUP COMMON STOCK		X		3-23-99	X									
SP	VORNADO REALTY TRUST COMMON STOCK		X		1-21-99	X									
SP	VISHAY INTERTECH COMMON STOCK		X		10-29-99	X									
SP	AMER HOME PRODUCTS COMMON STOCK	X			12-27-99	X									
SP	DELPHI AUTOMOTIVE COMMON STOCK	X			7-9,10-7, 12-27-99	X									
SP	AMSOUTH BANCORP COMMON STOCK	X			12-7-99 & 12-23-99	X									
SP	GENERAL MOTORS COMMON STOCK	X			12-10-99 & 12-13-99	X									
SP	NAVISTAR INTL COMMON STOCK	X			7-21, 8-9, 11-3,11-24-99	X									
SP	HEINZ COMMON STOCK	X			8-17,9-15, 11-22-99	X									

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SCHEDULE IV — TRANSACTIONS

Name CHARLES A. GONZALEZ

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	CIT GROUP COMMON STOCK	X			4-21, 5-10, 8-9, 11-17	X									
SP	ACE LTD COMMON STOCK	X			11-11-99	X									
SP	TEXACO COMMON STOCK	X			11-5-99	X									
SP	WARNACO GROUP COMMON STOCK	X			8-9-99 & 11-5-99	X									
SP	PREMIER PARKS COMMON STOCK	X			9-1, 9-28, 10-6, 11-1	X									
SP	ELECTR DATA SYS CORP COMMON STOCK	X			6-23, 7-30, 10-12-99	X									
SP	SPRINT COMMON STOCK	X			10-6-99	X									
SP	AK STEEL HOLDING COMMON STOCK	X			9-1-99 & 9-23-99	X									
SP	NCR CORP COMMON STOCK	X			7-26-99 & 9-21-99	X									
SP	EOG RESOURCES COMMON STOCK			X	9-16-99	N/A									
SP	ENRON OIL & GAS COMMON STOCK			X	9-16-99	N/A									
SP	WARNR LAMBERT COMPANY COMMON STOCK	X			4-1-99 & 8-19-99	X									
SP	SAKS INC TENN COMMON STOCK	X			5-26-99 & 8-18-99	X									
SP	ROBERTHALF INTL INC COMMON STOCK	X			8-12-99	X									
SP	GLAXO WELLCOME SPNSD COMMON STOCK	X			7-30-99	X									
SP	AUTONATION INC COMMON STOCK	X			7-13-99 & 7-28-99	X									

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SCHEDULE IV — TRANSACTIONS

Name CHARLES A. GONZALEZ

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	XL CAPITAL LTD COMMON STOCK	X			7-21-99	X									
SP	WASHINGTON MUTUAL INC COMMON STOCK	X			7-1-99	X									
SP	US WEST INC COMMON STOCK	X			5-19-99	X									
SP	LEARNING CO, INC COMMON STOCK			X	5-14-99	N/A									
SP	MATTEL INC COMMON STOCK			X	5-14-99	N/A									
SP	MEDIAONE GROUP INC COMMON STOCK	X			1-29-99 & 5-6-99	X									
SP	COMPAQ COMPUTER CORP COMMON STOCK	X			4-22-99	X									
SP	BECKMAN COULTER INC COMMON STOCK	X			2-24-99 & 4-14-99	X									
SP	EQUITY OFFICE COMMON STOCK	X			2-24-99	X									
SP	BIOCHEM PHARMA INC COMMON STOCK	X			2-18-99	X									
SP	ACE LTD COMMON STOCK	X			2-9-99	X									
SP	SIMON PROPERTY GRP COMMON STOCK	X			2-2-99	X									
SP	INGRAM MICRO INC COMMON STOCK	X			1-26-99	X									
SP	LEARNING CO INC COMMON STOCK	X			1-21-99	X									
SP	BERKSHIRE HATHAWAY COMMON STOCK			X	1-20-99	N/A									
SP	GENERAL RE CORP COMMON STOCK			X	1-20-99	N/A									

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SCHEDULE IV — TRANSACTIONS

Name CHARLES A. GONZALEZ

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	ALCOA INC COMMON STOCK			X	1-5-99	N/A									
SP	ALUMINUM CO COMMON STOCK			X	1-5-99	N/A									
SP	CITIGROUP INC COMMON STOCK	X			6-2-99	X									
SP	VAN KAMP PACE IRA	X			12-17-99	X									
SP	ML GLOBAL ALLOCATION FUND	X			7-16-99 & 12-21-99	X									

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Name CHARLES A. GONZALEZ

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
NONE							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

Use additional sheets if more space is required.

CHARLES A. GONZALEZ
MEMBER OF CONGRESS
20TH DISTRICT, TEXAS

327 CANNON HOUSE BUILDING
WASHINGTON, DC 20515-4320
(202) 225-3236 PHONE
(202) 225-1915 FAX

8-124 FEDERAL BUILDING
727 EAST DURANGO
SAN ANTONIO, TEXAS 78206-1286
(210) 472-6195 PHONE
(210) 472-4009 FAX

Email: Rep.Gonzalez@mail.house.gov

Congress of the United States
House of Representatives
Washington, DC 20515-4320

COMMITTEE ON BANKING
SUBCOMMITTEE ON FINANCIAL INSTITUTIONS AND CONSUMER CREDIT
SUBCOMMITTEE ON GENERAL OVERSIGHT AND INVESTIGATIONS

COMMITTEE ON SMALL BUSINESS
SUBCOMMITTEE ON TAX, FINANCE AND EXPORTS
SUBCOMMITTEE ON GOVERNMENT PROGRAMS AND OVERSIGHT

TEXAS REGIONAL WHIP

RECEIVED
00 MAY 15 PM 4:34
COMMITTEE ON STANDARDS

May 15, 2000

The Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon HOB
Washington, DC 20515-6612

Mc ✓
(1)

Re: Financial Disclosure
Statement for Calender
Year 1999

Dear Sir:

Please accept this as an amendment to Schedule VIII of May 1999 Financial Disclosure Statement:

INSIDE MAIL

Source: Chicago Mercantile Exchange
Date: June 21, 1999
Point of Departure- Washington DC
Destination - Point of Return: Washington D.C. - Chicago - Washington DC
Lodging: No
Food : Yes
Was Family Member Included: Yes
Any time not at sponsor's expense: No

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 16 PM 3:50
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Thank you for your time and assistance.

Very truly yours,

Charles A. Gonzalez
Member of Congress

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 11 PM 2:57

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(6)

HAND DELIVERED
MC
(Office Use Only)

Virgil H. Goode, Jr.
(Full Name)

115 Orchard Avenue
(Mailing Address)

Rocky Mount, VA 24151

Daytime Telephone
202-225-4711

Filer Status	[X] Member of the U S House of Representatives	State VA District 5th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** None besides member salary	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or de, endent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Virgil H. Goode, Jr.	May 10, 2000

1918

:HEDULE III — ASSETS AND "UNEARNED" INCOME

Name Virgil H. Goode, Jr.

Page 1 of 9

BLOCK A — Asset and/or Income Source

entify (a) each asset held for investment production of income with a fair market alue exceeding $1,000 at the end of the eporting year, and (b) any other asset or ource of income which generated more han $200 in "unearned" income during the ear. For rental property or land, provide an ddress. Provide full names of any mutual unds. For an IRA or retirement plan over which you have investment power, provide he required information on each underlying sset that exceeds the value or income eporting threshold. For an IRA or retirement lan that is not self-directed, name the nstitution holding the account and provide ts value at the end of the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT) in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	SP: Mega Corp Stock					X								X																		
DC	Examples: Simon & Schuster			Indefinite																Royalties									X			P
JT	1st Bank of Paducah KY accounts						X									X										X						
	2 acres with old office Rt. 2, Rocky Mount, VA				X												NONE															
	1/8 interest in house & lot, Rt. 1, Henry, VA			X													NONE															
	1/2 interest in 50 acres Rt. 3, Ferrum, VA 24088				X												NONE															
	lot and office 112 N. Main St. Rocky Mt, VA					X											NONE															
	1/2 interest-3 lots Kohler Rt. 1, Fieldale, VA 24089			X													NONE															
	1/2 interest with sister 28 acres, Rt. 1, Henry, VA			X													NONE															

... on next page

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Virgil H. Goode, Jr.

SP DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transactior P, S, E
	1/2 interest in 200 acres in house and land Rt. 2 Rocky Mount, VA (with sister)						X								X								X									
	1/2 interest with sister in 2 acres at Henry			X											X								X									
	1/2 interest with sister in 7.78 acres in BRD in Franklin County, VA			X													NONE															
	combined checking saving Crestar Bank, Rocky Mt., VA			X												X						X										
SP	Philip Morris Stock			X										X									X									
JT	Loudoun Co. Mun. Bond			X												X							X									
SP	Halifax Co. IDA Bond			X												X							X									
	Sun Trust Stock							X						X												X						
	Cardinal Stock				X									X									X									
	Capital One Stock						X							X									X									
	Peoples Bank Stock			X										X									X									
	Patrick Henry Bank Stock			X										X								X										
	Central Natl. Bank Stock	X														NONE																
	Shenandoah Natl. Bank Stock	X														NONE																
	Mountain National Bank Stock	X												X								X										
	Patriot Bank Stock			X										X								X										
	Vanguard Municipal Bond Fu						X									X									X							
	[redacted]																															
	Comdial Stock			X												NONE																
	First Union Stock						X							X											X							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Virgil H Goode, Jr. Page 3 of 4

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
SP	Vanguard Municipal Bond Fund	D	INTEREST	III	
	Chase ManhattenCommon Stock	D	DIVIDENDS	III	
	B. Perdue Notes, Roanoke, VA	D	INTEREST	V	
	Dominion Note(now First Union)	C	INTEREST	III	Paid off called
	Benefical Preferred(now household)	C	DIVIDENDS	III	
	Henry Co. Plywood Stock	C	DIVIDENDS	II	
	ATT Stock	B	DIVIDENDS	II	
	Lucent Technologies Stock	B	DIVIDENDS	II	
	Homestake Stock	C	DIVIDENDS	II	
	SBC Communications Stock	C	DIVIDENDS	II	
SP	Newport News Mun. Bond	C	INTEREST	III	
	Mod-U-Kraf Homes Stock	C	DIVIDENDS	II	
	BB and T(formerly Mainstreet)	D	DIVIDENDS	III	
	Franklin Co. Mun. Bond	C	INTEREST	III	
	Signet Banking Bond(now First Union)	C	INTEREST	III	called
	Wheat First IRA	C	INTEREST	II	
SP	Crestar IRA	C	INTEREST	II	
	Congressional Fed. Credit Union	C	INTEREST	III	
	Trigon Stock	C	None		
	Chesapeake Bay Bond	C	INTEREST	III	
	First VA Bank	C	DIVIDENDS	III	

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Virgil H. Goode, Jr. Page 4 of 4

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Federal Thrift SavingsPlan	D	DIVIDENDS	VI	
	American Electric Power	D	DIVIDENDS	III (This figure includes the agency match)	purchased
	Occidental Petroleum	D	DIVIDENDS	III	purchased
	DCH Technology	C	None	I None	purchased

This page may be copied if more space is required.

Name Virgil H. Goode, Jr.

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Signet Bank(First Union) Bonds		X		8/17/99	X		called							
	Dominion Bank Bond		X		6/15/99	X		called							
	American Electric Power	X			Apr/99		X								
	Occidental Petroleum	X			3/1/99		X								
	DCH Technology	X			7/9/99	X									

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CLERK'S RECEIPT CENTER
00 MAY 15 PM 6:08

Robert W. Goodlatte
(Full Name)

3725 Dogwood Lane, SW
(Mailing Address)

202-225-5431
Daytime Telephone

Roanoke, VA 24015

HAND DELIVERED (8)
MC
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State VA District 6	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bob Goodlatte	May 15, 2000

Name Goodlatte, Robert W. | Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Glenn, Feldman, Darby and Goodlatte, P.C., Roanoke, Virginia	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Goodlatte, Robert W.	Page 3 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb 2, 1999	$2,000
Examples: XYZ Magazine	Article	Aug 13, 1999	$500
National Association of Realtors	Speech	Nov. 13, 1999	$2,000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								P
Examples: DC	Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	Wachovia Bank Roanoke, VA (savings)			X												X						X										
JT	Bank of America Roanoke, VA (savings)			X												X						X										
JT	First Citizens Bank Roanoke, VA (sav/chk)				X											X								X								
	First Citizens Bank Roanoke, VA (Savings)				X											X								X								
	Crestar Bank Roanoke, VA (IRA)			X												X							X									
SP	Crestar Bank Roanoke, VA (IRA)			X												X							X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Goodlatte, Robert W.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Greenwood Trust Co, DE			X												X						X										
	Charter Fed, Roa,VAIRA			X												X						X										
	Conn Mut. Life (Lif In			X										X								X										
SP	Duff-Phelps Util 401K				X									X										X								
SP	Guardian Pk Ave 401K					X								X								X										
SP	Walmart Store Nt 401K			X												X							X									
SP	Bond Fd of Amer 401K				X									X										X								
SP	New Persp. Fund 401K				X									X									X									
SP	NewYork Vent. Fund 401K				X									X								X										
SP	Bkrs Tr Mkt Linked 401K				X											X					X											
SP	Bkrs Tr Eufe Lnkd 401K				X											X					X											
SP	Seligman Comm 401K					X								X							X											
SP	Gam Int Funds 401K				X									X							X											
SP	Sogen Int Fund 401K				X									X							X											
SP	Fd Nat Mrt CMO Bd 401K			X												X						X										
	Janus Fund IRA					X								X							X											
SP	Old Kent Fin. IRA			X										X								X										
SP	GNMA Gvt Sec Fd IRA		X											X								X										
SP	Merr. Lynch Glo Bd IRA			X										X								X										
SP	Merr. Lyn. Fd Gwth IRA				X									X							X											
SP	Merr. Lyn. Glb Res Tr			X										X								X										
SP	Wash. Mut. Inv Fd IRA			X										X									X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Goodlatte, Robert W.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Merr. Lyn. Ret Res IRA			X												X							X									
SP	Nicholas Fund IRA				X									X							X											
JT	Amer. Fds Tax Empt Bds				X									X										X								
SP	Glenn,Feldman,Darb&Goo					X								X							X											
JT	Fd Amer Inv Coll Mtg		X													X						X										
JT	Ind Natl Mtg Corp CT F			X												X								X								
JT	State St Res Equity TR				X									X								X										
JT	AG Edward Dly Ch MMkt			X												X							X									
	AG Edward Dly Ch MMkt			X												X						X										
	Templeton For. Fd IRA			X										X								X										
	Investment Co of Amer			X										X									X									
	UTS Govt Secs Ins IRA		X													X						X										
SP	JC Bradford Mny Mkt401K				X											X								X								
JT	MFS VA Muni Bd Fund				X											X								X								
JT	T Rowe Pr. Int Stk Fd				X									X									X									P
DC	Wachovia Bk				X											X								X								
	Note - Bird,Kinder,Huff.			X												X					X											

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Name Goodlatte, Robert W. | Page 7 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	Bankers Trust Mkt Linked (5-14-2009)	X			4-30-99		X								
SP	Bankers Trust Mkt Linked (7-28-2007)		X		5-5-99		X								
SP	Kroger Co. Bond		X		5-3-99	X									
SP	Federal Natl Mort. Assoc.		X		1-19-99 to 11-17-99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Consumer Elec. Manuf. Assoc.	Jan. 7-10	Wash, DC - Las Vegas, NV - Wash, DC	Y	Y	Y	N
The Aspen Instit. - Bipartian Congress. Retreat	Mar 19-21	Wash, DC - Hershey, PA Wash, DC	Y	Y	Y	N
Network Assoc, Recording Ind. Of Amer, MPA, Disney, CEMA	Apr 4-8	Wash, DC - San Fran, CA Newport Beach-Wash, DC	Y	Y	Y	N
Virginia Forestry Assoc.	Apr 30 - May 1	Wash, DC - Wintergreen VA - Wash, DC	Y	Y	N	N
OPASTCO	July 18 - 19	Roanoke, VA - Hot Springs, VA - Roa., VA	Y	Y	N	N
National Assoc. of Realtors	Nov 11-15	Wash, DC - Orlando, FL - Wash., DC	Y	Y	Y	1 Day

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 4:02
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (7)
(Office Use Only)

William Franklin Goodling
(Full Name)

RD #3, Box 3026-A
(Mailing Address)

Seven Valleys, PA 17360

Daytime Telephone 202-225-5836

Filer Status	[x] Member of the U S House of Representatives	State: PA District: 19th	[ ] Officer or Employee — Employing Office
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [x]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [x]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William F. Goodling	May 11, 2000

Name	William F. Goodling	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	PA Public School Retirement	Teacher Annuity	6,605
	York Suburban School District	Spouse Salary	N/A
	Christmas Tree Hill, Inc.	Spouse Salary	N/A
	Board of Education of Baltimore County	Spouse Salary	N/A
	National Financial Center	TSP Distribution	10,362
	PA Public School Retirement	Spouse Teacher Annuity	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name William F. Goodling

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B	Block C	Block D	Block E
			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock			X		P
	Simon & Schuster		Indefinite		X	
	1st Bank of Paducah, KY accounts		X	X	X	
JT	Thoroughbred Horses		X	x	x	P
	See Page 7			Fees & Gross Proceeds		

For additional assets and unearned income, use next page.

Name William F. Goodling

Page 4 of 7

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	Storm Broker - Stallion 1/4 share	X				X									

This page may be copied if more space is required.

Name William F. Goodling

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x						
JT	Congressional Federal Credit Union	Note Payable		x								
JT	First Capital Bank	Note Payable	x									
JT	York Federal Savings & Loan Assn	Note Payable	x									

SCHEDULE VI — GIFTS N/A

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Aspen Institute	2/12-15	Wash, DC-St.Petersburg FL--Wash., D.C	Y	Y	Y	no
	Ashland Oil Toyota Motor Manufacturing	4/9-4/10	York, PA-Lexington,KY--York, PA	Y	Y	N	no

Goodling Thoroughbreds

1999

Ownership Interest	Type	Name	Transaction	Est. Fair Market Value 12/31/98	12/31/99
1/4	Share of Stud	Storm Broker	Purchased	0	$4,000
1/3	Share of Stud	Dover Ridge		$500	$500
1/3	Share of Stud	Allens Prospect		$3,000	$3,000
Full	Broodmare	Elegant Lady		$1,000	$3,000
Full	2 yr Filly	Anetta J		$3,000	$3,000
Full	Weanling Filly	Lady of Dover		0	$1,000
Full	Broodmare	Winning Falcon		$2,000	$3,000
Full	Weanling Colt	Mister Goodie		0	$3,000
			Totals	$9,500	$20,500

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY -8 PM 4:00
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

BARTON JENNINGS GORDON - 940 E. Northfield Blvd, Murfreesboro TN 37130
(Full Name)

2368 RHOB (202) 225-4231
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: TN District: 06	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bart Jennings Gordon	5/8/99

Name BARTON JENNINGS GORDON | Page ____ of ____

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	KORN/FERRY	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

1940

Name BARTON JENNINGS GORDON | Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500

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Name Barton Jennings Gordon | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	Wright Patman Credit Union Acct				X												X							X									
	Linder IRA					X																X											
SP	Korn/Ferry Int'l										X											X											
SP	Fidelity 401(k) Index Fund							X														X											
SP	AT&T Stock				X										X								X										
SP	AT&T Liberty Media Stock																						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BARTON JENNINGS GORDON | Page ___ of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Capital One Fin'l Stock			X										X								X										
SP	CISCO Systems Stock				X									X								X										
SP	EMC Corp Stock				X									X								X										
SP	Goldman Sachs Stock			X										X								X										
SP	Home Depot Stock			X										X								X										
SP	Intel Stock			X										X								X										
SP	JP Morgan Stock			X										X								X										
SP	Pfizer Stock			X										X								X										
SP	Proctor & Gamble Stock			X										X								X										
SP	Tyco International Stock			X										X										X								
SP	Cash in DLJ Account				X									[redacted]		X						X										
SP	Cash in Bull & Bear Securities			X												X																

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SCHEDULE IV — TRANSACTIONS

Name BARTON JENNINGS GORDON | Page ___ of ___

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	AT&T Common Stock	X			5/13/99	X									
SP	AT&T Liberty Media Common Stock	X			4/19/99	X									
SP	Capitol One Financial Common Stock	X			3/29/99	X									
SP	Capitol One Financial Common Stock	X			5/24/99	X									
SP	Capitol One Financial Common Stock		X		10/18/99	X									
SP	Capitol One Financial Common Stock		X		12/28/99	X									
SP	Coca Cola Corporation Common Stock	X			6/4/99	X									
SP	Coca Cola Corporation Common Stock		X		12/28/99	X									
SP	Cisco Systems Common Stock	X			3/29/99	X									
SP	DLJ Direct Common Stock	X			5/25/99	X									
SP	DLJ Direct Common Stock		X		12/28/99	X									
SP	Emc Corp Common Stock	X			3/29/99	X									
SP	EToys INC. Common	X			5/19/99	X									
SP	EToys INC. Common		X		5/21/99	X									
SP	Exxon Mobile Corp. Common	X			6/4/99	X									
SP	Exxon Mobile Corp. Common		X		12/28/99	X									

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SCHEDULE IV — TRANSACTIONS

Name BARTON JENNINGS GORDON | Page of

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	x			10-12-99		x								
SP	Goldman Sachs Group Common	X			8/6/99	X									
SP	GoTo.Com INC Common	X			6/18/99	X									
SP	GOTO.Com INC Common		X		7/2/99	X									
SP	Home Depot Common	X			3/29/99	X									
SP	Intel Corp Common	X			6/21/99	X									
SP	JP Morgan Common	X			10/18/99	X									
SP	McKesson Common	X			5/13/99	X									
SP	McKesson Common		X		5/25/99	X									
SP	Merk Common	X			6/8/99	X									
SP	Merk Common		X		12/28/99	X									
SP	Pfizer Common	X			6/8/99	X									
SP	Priceline.com common	X			3/29/99	X									
SP	Priceline.com common		X		4/5/99	X									
SP	Procter & Gamble Common	X			6/4/99	X									
SP	Tyco International	X			4/19/99	X									
SP	Ziff Davis Inc ZD Net Common	X			3/30/99	X									

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Name | Page ___ of ___

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	Ziff Davis Inc ZDNet Common		X			X									
SP	Korn/Ferry International Commor	X													
SP	Korn/Ferry International Commor		X							X					
									X						

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Name	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor		Type of Liability	Amount of Liability									
				B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source		Description	Value
Example:	Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Barton Jennings Gordon | Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Ripon Educational Fund	Aug 13-21	Wash, DC-Sweden-Wash, DC	X	Y	Y	NA
	CATO	July 16-19	Wash, DC.-St. Helena, CA Wash, DC	Y	Y	Y	NA

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Name	Page of

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

BART GORDON
8TH DISTRICT TENNESSEE
COMMERCE COMMITTEE
SCIENCE COMMITTEE
RANKING MEMBER
SUBCOMMITTEE ON SPACE

Congress of the United States
House of Representatives

2368 RAYBURN BUILDING
WASHINGTON, DC 20515-4208
(202) 225-4231
FAX (202) 225-6887

106 SOUTH MAPLE STREET
P.O. BOX 1986
MURFREESBORO, TN 37133
(615) 896-1996
FAX (615) 896-8218

17 SOUTH JEFFERSON STREET
P.O. BOX 1140
COOKEVILLE, TN 38501
(931) 528-5907

June 6, 2000

HAND DELIVERED

00 JUN 12 PM 2:08

RECEIVED

The Clerk, U.S. House of Representatives
Legislative resource Center
B106 Cannon House Office Building
Washington, DC 20515-6612

(3)

MC

To Whom it May Concern:

I am writing to amend my financial disclosure filing for 1998 and 1999 with regard to Schedule III, Assets and Unearned Income.

With regard to my 1998 filing, my spouse's Fidelity 401k was inadvertently omitted and should be added to Schedule III. In addition, the amount should be marked in the $100,000-$250,000 range.

With regard to my 1999 filing, four assets of my spouse were also inadvertently omitted and need to be added. I have enclosed a new Schedule III work sheet with the necessary information already added. Please disregard my last Schedule III and replace it with the enclosed.

Please make these changes to my disclosure as soon as possible. If you have any questions, please do not hesitate to contact myself or Tracy Walraven of my staff.

Sincerely,

BART GORDON
Member of Congress

BJG/tw
Enclosure

email: bart.gordon@mail.house.gov
Internet: http://www.house.gov/gordon/

Name BARTON JENNINGS GORDON | Page ___ of

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transactio

Indicate if asset was purchased (P), sold (S) or exchanged (E) in reporting year.

	Block A		Block B		Block C												Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock	Indefinite			X								X										X							P
			Simon & Schuster														X				Royalties								X			
			1st Bank of Paducah, KY accounts					X																		X						
	Wright-Patman Credit Union				X												X							X								
	Linder IRA					X																X										
SP	KORN/FERRY Int'l										X											X										
SP	FIDELITY 401(K) Index							X														X										
SP	AT:T STOCK				X										X								X									
SP	AT:T LIBERTY MEDIA STOCK				X										X								X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BARTON JENNING GORDON Page ___ of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	Capital One Fin'l Stock			X										X									X									
SP	CISCO Systems Stock				X									X									X									
SP	EMC Corp Stock				X									X									X									
SP	Goldman Sachs Stock			X										X									X									
SP	Home Depot Stock			X										X									X									
SP	Intel Stock			X										X									X									
SP	JP Morgan Stock			X										X									X									
SP	Pfizer Stock			X										X									X									
SP	Proctor & Gamble Stock			X										X									X									
SP	Tyco Int'l Stock			X										X										X								
SP	Cash in DLJ Acct				X												X						X									
SP	Cash in Bull + Bear Securities			X													X						X									
SP	ETOYS.COM Stock			X													X							X								
SP	Priceline.com Stock			X													X									X						
SP	Ziff Davis Stock			X													X								X							
SP	GoTo.Com Stock			X													X							X								

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (18)
(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Porter J. Goss
(Full Name)

P.O. Box 248
(Mailing Address)
Sanibel FL 33957

Daytime Telephone:
202-225-2536

Filer Status	[X] Member of the U.S. House of Representatives	State: FL District: 14	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[ ]	[X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	[X]	[ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[ ]	[X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	[ ]	[X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[X]	[ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 9, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/15/2000

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT — *Examples:* SP — Mega Corp Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
SP	Berkshire Life Insurance	not applicable	annuity	$201 - $1,000	
SP	National Life of Vermont	not applicable	annuity	$1,001 - $2,500	
	Aetna Life Insurance	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	Fishers Island Utility (stock)	$15,001 - $50,000	Dividends	$201 - $1,000	
JT	Community Bank of the Islands (check accts)	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Fishers Island Development Company	$15,001 - $50,000	none	None	
JT	Fishers Island-undeveloped real property	$500,001 - $1,000,000	none	None	

1954

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Fifth Third Bank (was So. Florida Bank)	$1,001 - $15,000	Interest	$1 - $200	
JT	Fifth Third Bank (stock)(was So. Florida Bk)	$1,001 - $15,000	Dividends	$1 - $200	E
JT	Fleet Bank Account	None	Interest	$1 - $200	closed
SP	Charles Oliver Trust (partial interest)	$250,001 - $500,000	Dividends	$5,001 - $15,000	
SP	Crestar Bank Account	None	Interest	None	closed
	Farm Land, Rapidan, Virginia	$500,001 - $1,000,000	rent--grazing fee	$5,001 - $15,000	partial purchase
JT	Nations Bank (Bank of America)	$15,001 - $50,000	Interest	$1 - $200	
	Lee County Electric Co-op	$1,001 - $15,000	Equity distribution	$1 - $200	
	South FL Holding Co. (acquired by Fifth Third)	None	Dividends	$1 - $200	exchanged & acquisition
	Lee County Electric Co-op	$1 - $1,000	equity distribution	$1 - $200	
	AT&T Corporation	$100,001 - $250,000	Dividends	$1,001 - $2,500	partial purchase
	Abbott Laboratories	$100,001 - $250,000	Dividends	$2,501 - $5,000	
	Air Products & Chemicals	$100,001 - $250,000	Dividends	$2,501 - $5,000	
	Aluminum Company of America	$100,001 - $250,000	Capital Gains and Dividends	$15,001 - $50,000	partial sale
	American Home Products	$500,001 - $1,000,000	Capital Gains and Dividends	$15,001 - $50,000	partial sale
	American Internatioal Group, Inc.	$50,001 - $100,000	Dividends	$1 - $200	
	Ameritech Corporation (merger) see SBC Communications	see SBC	see SBC	NA	merger
	Atlantic Richfield	$100,001 - $250,000	Dividends	$5,001 - $15,000	partial sale

1955

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Automatic Data Processing Inc.	$15,001 - $50,000	Dividends	$1 - $200	
	BancOne Corporation	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	BankAmerica Corporation	$250,001 - $500,000	Dividends	$15,001 - $50,000	
	Bell Atlantic Corporation	$250,001 - $500,000	Dividend	$5,001 - $15,000	
	BellSouth Corporation	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	Bestfoods	$250,001 - $500,000	Dividends	$5,001 - $15,000	
	Blackrock Funds (mutual/fixed)	$1,001 - $15,000	Dividends/Interest/Capital Gains	$1 - $200	P, S, AND E
	Blackrock Funds (mutual equity & cash equity)	$500,001 - $1,000,000	Dividends/Interest/Capital Gains	$15,001 - $50,000	P, S, AND E
	Boyertown Area School District PA (B)	None	Interest	$201 - $1,000	S
	Bristol Myers Squibb Company	$250,001 - $500,000	Dividends	$5,001 - $15,000	
	Broward County Florida (B)	None	Interest and Capital Gains	$201 - $1,000	S
	Bucks County PA Community College Authority (B)	$50,001 - $100,000	Interest	$2,501 - $5,000	
	Burlington Northern Santa Fe Corporation	$100,001 - $250,000	Dividends	$2,501 - $5,000	
	Burlington Resources Inc.	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	CSX Corporation (sold 5/18/99	None	Capital Gains and Dividends	$201 - $1,000	S
	Carnival Cruise Lines Inc	$15,001 - $50,000	Dividends & Split	$1 - $200	
	Chevron Corporation	$50,001 - $100,000	Dividends	$2,501 - $5,000	
	Cisco Systems Inc	$500,001 - $1,000,000	None	None	
	Clarion PA Area School District (B)	$50,001 - $100,000	Interest	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Coca Cola Company	$1,000,001 - $5,000,000	Dividends	$5,001 - $15,000	
	Corn Products International	$15,001 - $50,000	Dividends	$201 - $1,000	
	Corning Inc	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	partial sale
	DF Pennsylvania Short Term Tax Exempt Fund	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	purchased/sold (partial)
	DF Pennsylvania Tax Exempt Fund	$500,001 - $1,000,000	Dividends	$15,001 - $50,000	P
	DF Special Stock Fund	$250,001 - $500,000	Dividends	$2,501 - $5,000	P
	DPL Inc	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	Disney Walt Company	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	Dow Chemical Company	$250,001 - $500,000	Dividends	$5,001 - $15,000	
	DuPont E I De Nemours & Company	$100,001 - $250,000	Dividends	$2,501 - $5,000	partial sale
	Eastman Kodak Company	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	partial sale
	Easton PA Rfdg Ser A Fgic (B)	$50,001 - $100,000	Interest	$2,501 - $5,000	
	El Paso Energy Corporation	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Electronic Data Systems	$50,001 - $100,000	Dividends	$201 - $1,000	
	Emerson Electric	$100,001 - $250,000	Dividends	$2,501 - $5,000	
	Exxon Corporation	$15,001 - $50,000	Dividends	$201 - $1,000	
	FPL Group Inc	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Federal National Mtg Assn, Inc	$100,001 - $250,000	Dividends	$1,001 - $2,500	

1957

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	First Union	$50,001 - $100,000	Dividends	$2,501 - $5,000	
	Fleet Financial Group/Boston	$15,001 - $50,000	Dividends	$201 - $1,000	
	Florida Progress Corporation	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Gallaher Group Inc. PLC	$1,001 - $15,000	Dividends	$1,001 - $2,500	
	General Electric	$1,000,001 - $5,000,000	Capital Gains and Dividends	$15,001 - $50,000	partial sale
	General Motors Corporation	$1,001 - $15,000	Dividends	$201 - $1,000	
	Georgia Pacific Corporation	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	partial sale
	Gillette Compnay	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Heinz H J Company	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Hewlett-Packard Company	$15,001 - $50,000	Dividends	$201 - $1,000	
	Home Depot Inc	$500,001 - $1,000,000	Dividends	$1,001 - $2,500	
	Household International Inc	$15,001 - $50,000	Dividends	$201 - $1,000	
	Intel Corporation	$100,001 - $250,000	Dividends	$1 - $200	
	International Business Machine	$1,000,001 - $5,000,000	Dividends	$5,001 - $15,000	
	Johnson & Johnson	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	Keystone Oaks PA School Authority (B)	$15,001 - $50,000	Interest	$201 - $1,000	
	Lackawanna County PA New Public Housing (B)	$15,001 - $50,000	Interest	$1,001 - $2,500	
	Lifeline Systems Inc	$15,001 - $50,000	None	None	
	Lower Moreland Township Authority (B)	$1,001 - $15,000	Interest and Capital Gains	$1,001 - $2,500	partial sale

1958

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Lubrizol Corporation	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Lucent Technologies	$100,001 - $250,000	Dividends	$1 - $200	
	May Department Stores	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	McDonalds Corporation	$15,001 - $50,000	Dividends	$1 - $200	
	MediaOne Group	$100,001 - $250,000	None	None	
	Merck & Compnay Inc	$1,000,001 - $5,000,000	Dividends	$15,001 - $50,000	
	Microsoft	$500,001 - $1,000,000	None	None	P
	Millcreek Township PA Swr Auth Swr (B)	$1,001 - $15,000	Interest	$201 - $1,000	
	Millipore Corporation	$15,001 - $50,000	Dividends	$201 - $1,000	
	Minnesota Mining & Manufacturing	$500,001 - $1,000,000	Capital Gains and Dividends	$15,001 - $50,000	partial sale
	Montgomery County PA	$50,001 - $100,000	Interest	$2,501 - $5,000	
	Motorola Inc	$100,001 - $250,000	Dividends	$201 - $1,000	
	Norfolk Southern Corporation	$50,001 - $100,000	Dividends	$2,501 - $5,000	
	Oracle Corporation	$100,001 - $250,000	Dividends	None	
	Overriding Royalty in State Oil Leases, LA	$500,001 - $1,000,000	Royalty	$100,001 - $1,000,000	
	PNC Bank Corporation	$500,001 - $1,000,000	Dividends	$15,001 - $50,000	
	PPG Industries Inc	$500,001 - $1,000,000	Dividends	$15,001 - $50,000	
	Pennsbury School District	$15,001 - $50,000	Interest	$1,001 - $2,500	
	Pennsylvania State (394853) (B)	$15,001 - $50,000	Interest	$1,001 - $2,500	

1959

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Pepsico Inc	$100,001 - $250,000	Capital Gains and Dividends	$1,001 - $2,500	partial sale
	Phillip Morris	$100,001 - $250,000	Dividends	$5,001 - $15,000	
	Proctor & Gamble Company	$250,001 - $500,000	Dividends	$2,501 - $5,000	
	Providian Corporation	$100,001 - $250,000	Dividends	$201 - $1,000	
	Royal Dutch Petc Company	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	SBC Communications (was Ameritech)(merged)	$500,001 - $1,000,000	Dividends	$5,001 - $15,000	merged Ameritech
	Sara Lee Corporation	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Schlumberger Ltd	$50,001 - $100,000	Dividends	$201 - $1,000	
	Seattle Wash Scr A (B)	$100,001 - $250,000	Interest	$2,501 - $5,000	
	Shade Central PA City School Dist (B)	$50,001 - $100,000	Interest	$2,501 - $5,000	
	TRW Inc	$15,001 - $50,000	Dividends	$201 - $1,000	
	TransAmerica Corp (merged with Aegon. NV CO 7/23/99)	None	Capital Gains and Dividends	$15,001 - $50,000	merged and sold
	Tricon Global Restaurants Inc	$1,001 - $15,000	None	None	
	U S West Inc	$100,001 - $250,000	Dividends	$5,001 - $15,000	
	Upper St Clair Township PA School Authority (B)	$1,001 - $15,000	interest and capital gains	$201 - $1,000	partial sale
	Wal-Mart Stores Inc	$1,000,001 - $5,000,000	Dividends	$5,001 - $15,000	
	Waste Managment Inc	None	Dividends	$1 - $200	S
	West Goshen Sewer Authority PA (B)	$1,001 - $15,000	Interest	$1 - $200	S

1960

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Xerox Corporation	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	DF Int Inv Fund	$50,001 - $100,000	Dividends	$1,001 - $2,500	P
	William J. Robinson Family Trust (partial beneficiary income interest) 294	$1,000,001 - $5,000,000	None	None	
	Illinois Tool Works (was Premark Int'l Inc)	$1,001 - $15,000	Dividends	$1 - $200	acquired by merger
	Tyco International LTD (was Amp Inc)	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	acquired by merger & partial sale
	Honeywell International (name changed from Allied Signal)	$15,001 - $50,000	Dividends	$201 - $1,000	name changed from Allied Signal
	Vodafone Airtouch (merger) (was Airtouch Communication)	$15,001 - $50,000	Dividends and Capital Gains	$1,001 - $2,500	merger
	Federated Trust for Government	$1,001 - $15,000	(cash mgmt acct)	None	P AND S
	BHC Communications	None	Capital Gains and Dividends	$15,001 - $50,000	S
	Clay County FL Gas Tax Rev Ref (B)	None	Interest and Capital Gains	$1,001 - $2,500	S
	Collier County FL Wtr/Swr Dist (B)	None	Interest and Capital Gains	$2,501 - $5,000	S
	Coral Springs FL Franchise Rev (B)	None	Interest and Capital Gains	$2,501 - $5,000	S
	Dade County FL Edl Facs Auth Rev (B)	None	Interest and Capital Gains	$2,501 - $5,000	S
	Dade County FL Wtr/Swr Sys Rev (B)	None	Interest and Capital Gains	$1,001 - $2,500	S
	Dun & Bradstreet Corporation	None	Capital Gains and Dividends	$201 - $1,000	S
	Eastman Chemical Company	None	Capital Gains and Dividends	$5,001 - $15,000	S
	Ft. Myers FL Impt Rev	None	Interest and Capital Gains	$2,501 - $5,000	S
	Ft. Lauderdale FL Excise Tax (B)	None	Interest and Capital Gains	$2,501 - $5,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Fortune Brands Inc	None	Capital Gains and Dividends	$15,001 - $50,000	S
IMS Health Inc	None	Capital Gains and Dividends	$1,001 - $2,500	S
Imation Corporation	None	Capital Gains	$5,001 - $15,000	S
International Paper Company	None	Dividends	$1 - $200	S
Cigna Corporation	None	Capital Gains and Dividends	$2,501 - $5,000	S
Jacksonville FL Elec Auth Rev (2005)(B)	None	Interest and Capital Gains	$2,501 - $5,000	S
Kimberly-Clark Corporation	None	Capital Gains and Dividends	$50,001 - $100,000	S
Lee County FL Cap Impt Rev Ser A (B)	None	Interest and Capital Gains	$2,501 - $5,000	S
Orange County FL Solid Waste (B)	None	Interest and Capital Gains	$1,001 - $2,500	S
Osceola County FL Gas Tax Rev (B)	None	Interest and Capital Gains	$5,001 - $15,000	S
J C Penney Company	None	Dividends	$2,501 - $5,000	S
Pinellas County FL Swr Rev (B)	None	Interest and Capital Gains	$1,001 - $2,500	S
Raytheon	None	Capital Gains and Dividends	$15,001 - $50,000	S
Sebring FL Wtr & Wastewtr Rev (B)	None	Interest and Capital Gains	$2,501 - $5,000	S
Seminole County FL Sch Dist (B)	None	Interest and Capital Gains	$2,501 - $5,000	S
St Petersburg FL Excise Tax (B)	None	Interest and Capital Gains	$1,001 - $2,500	S
Blackrock Int'l Fund	None	Capital Gains and Dividends	$15,001 - $50,000	S
Delphi Auto Systems (GM spin-off)	None	Capital Gains and Dividends	$201 - $1,000	GM spin-off/sold
North Palm Beach County Impt	None	Interest	$2,501 - $5,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Broward County Florida (B)	None	Interest and Capital Gains	$2,501 - $5,000	S

1963

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Boyertown Area School District PA (B)	Sold	3/1/99	$15,001 - $50,000
	CSX Corporation	Sold	5/18/99	$15,001 - $50,000
	DF International Investment Fund	Purchase	5/15/99	$15,001 - $50,000
	DF Pennsylvania Short Term Tax Exempt Fund	Purchase	5/31/99	$50,001 - $100,000
	DF Pennsylvania Tax Exempt Fund	Purchase	5/31/99	$50,001 - $100,000
	DF Special Stock Fund	Purchase	5/31/99	$15,001 - $50,000
	TransAmerica-Aegon NV Co. (mandatory merger)	Merger	7/23/99	$1,001 - $15,000
	Aegon NV Co	Sold	8/16/99	$15,001 - $50,000
	Kimberly Clark Corporation	Sold	8/11/99	$50,001 - $100,000
	West Goshen PA Swr (partial call)	Sold	9/1/99	$1,001 - $15,000
	DF Pennsylvania Tax Exempt	Purchase	8/31/99	$100,001 - $250,000
	DF Pennsylvania Short Term Tax Exempt	Sold	8/31/99	$50,001 - $100,000
	Blackrock Fund 95	Purchase	11/16/99	$1,001 - $15,000
	Blackrock Fund 95	Sold	12/9/99	$1,001 - $15,000
	General Electric	Sold	1/28/99	$1,001 - $15,000
	Blackrock Fund 95	Purchase	11/16/99	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Waste Management Inc	Sold	12/13/99	$1,001 - $15,000
	Illinois Tool Works (rec'd from mandtory merger-was Premark Int'l)	Merger	11/26/99	$1,001 - $15,000
	Tyco International LTD (mandatory merger--Amp Inc)	Merger	4/2/99	$15,001 - $50,000
	SBC Communications (mandatory merger with Ameritech Corp)	Merger	10/12/99	$15,001 - $50,000
	Upper St. Clair township PA (partial call)	Sold	8/2/99	$1,001 - $15,000
	General Electric	Sold	6/9/99	$1,001 - $15,000
	Lower Moreland Township Authority	Sold	10/1/99	$1,001 - $15,000
	AT&T	Purchase	12/15/99	$15,001 - $50,000
	Georgia Pacific Corporation	Sold	12/13/99	$1,001 - $15,000
	Microsoft Corporation	Purchase	12/13/99	$15,001 - $50,000
	J.C. Penney	Sold	12/13/99	$15,001 - $50,000
	Federated Trust for Government	Purchase	1/31/99	$500,001 - $1,000,000
	Federated Trust for Government	Purchase	2/28/99	$1,001 - $15,000
	Federated Trust for Government	Sold	3/31/99	$100,001 - $250,000
	Blackrock Int Funds	Sold	4/5/99	$15,001 - $50,000
	Atlantic Richfield	Sold	4/7/99	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	DuPont E I De Nemours & Co	Sold	4/7/99	$1,001 - $15,000
	Dun & Bradstreet Corporation	Sold	4/7/99	$1,001 - $15,000
	International Paper Company	Sold	4/7/99	$15,001 - $50,000
	Kimberly Clark Corporation	Sold	4/7/99	$15,001 - $50,000
	Minnesota Mining & Manufacturing	Sold	4/7/99	$1,001 - $15,000
	Federated Trust for Government	Sold	4/30/99	$15,001 - $50,000
	Blackrock Funds	Sold	5/21/99	$1,001 - $15,000
	IMS Health Inc	Sold	5/25/99	$1,001 - $15,000
	Pepsico Inc	Sold	5/25/88	$1,001 - $15,000
	Federated Trust for Government	Sold	5/31/99	$250,001 - $500,000
	Federated Trust for Government	Sold	6/30/99	$15,001 - $50,000
	Federated Trust for Government	Purchase	8/31/99	$1,001 - $15,000
	American Home Prodcuts	Sold	10/20/99	$15,001 - $50,000
	Cigna Corporation	Sold	10/20/99	$15,001 - $50,000
	Delphi Auto Systems	Sold	10/20/99	$1,001 - $15,000
	Eastman Kodak Company	Sold	10/20/99	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Northern Palm Beach County Impt	Sold	10/22/99	$15,001 - $50,000
	Federated Trust for Government	Sold	10/31/99	$50,001 - $100,000
	Tyco International LTD	Sold	11/5/99	$15,001 - $50,000
	Aluminum Company of America	Sold	11/22/99	$15,001 - $50,000
	Corning Inc	Sold	11/30/99	$1,001 - $15,000
	Federated Trust for Government	Sold	11/30/99	$1,001 - $15,000
	Federated Trust for Government	Sold	12/31/99	$1,001 - $15,000
	Federated Trust for Government	Sold	1/31/99	$250,001 - $500,000
	Federated Trust for Government	Purchase	1/31/99	$250,001 - $500,000
	Blackrock Funds Int #65	Sold	2/25/99	$100,001 - $250,000
	Federated Trust for Government	Sold	2/28/99	$100,001 - $250,000
	Federated Trust for Government	Sold	3/31/99	$1,001 - $15,000
	BHC Communications	Sold	4/7/99	$50,001 - $100,000
	Eastman Kodak	Sold	4/7/99	$15,001 - $50,000
	Imation Corporation	Sold	4/7/99	$1,001 - $15,000
	Broward County Florida (B)	Sold	4/7/99	$50,001 - $100,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Clay County Florida Gas Tax Rev Ref (B)	Sold	4/8/99	$50,001 - $100,000
	Coral Springs FL Franchise Rev (B)	Sold	4/8/99	$100,001 - $250,000
	Dade County FL Edl Facs Auth Rev (B)	Sold	4/8/99	$100,001 - $250,000
	Dade County FL Wtr Swr System Rev (B)	Sold	4/8/99	$50,001 - $100,000
	Ft Lauderdale FL Excise Tax (B)	Sold	4/8/99	$50,001 - $100,000
	Lee County FL Cap Impt Rev Ser A (B)	Sold	4/8/99	$50,001 - $100,000
	Orange County FL Solid Waste	Sold	4/8/99	$50,001 - $100,000
	Pinellas County FL Swr Rev (B)	Sold	4/8/99	$50,001 - $100,000
	St Petersburg FL Excise Tax (B)	Sold	4/8/99	$50,001 - $100,000
	Collier County FL Wtr Swr Dist	Sold	4/12/99	$50,001 - $100,000
	Federated Trust For Government	Purchase	4/30/99	$500,001 - $1,000,000
	Blackrock Funds PA Tax Free	Sold	5/21/99	$100,001 - $250,000
	Eastman Chemical Company	Sold	5/25/99	$1,001 - $15,000
	Airtouch Communications (merger) AKA Vodaphone	Merger	6/30/99	$1,001 - $15,000
	Federated Trust for Government	Sold	6/30/99	$100,001 - $250,000
	Ft Myers FL Impt Rev	Sold	7/30/99	$50,001 - $100,000

1968

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Jacksonville FL Elec Auth Rev (2005) (B)	Sold	7/30/99	$50,001 - $100,000
	Osceola County FL Gas Tax Rev (B)	Sold	7/30/99	$50,001 - $100,000
	Sebring FL Wtr & Wastewtr Rev (B)	Sold	7/30/99	$50,001 - $100,000
	Seminole County FL Sch Dist (B)	Sold	7/30/99	$50,001 - $100,000
	Federated Trust for Government	Purchase	7/31/99	$1,001 - $15,000
	Federated Trust for Government	Sold	8/31/99	$250,001 - $500,000
	Federated Trust for Government	Sold	9/30/99	$50,001 - $100,000
	Raytheon Company	Sold	10/20/99	$50,001 - $100,000
	Federated Trust for Government	Purchase	10/31/99	$1,001 - $15,000
	Fortune Brands	Sold	11/13/99	$15,001 - $50,000
	Federated Trust Government	Sold	11/30/99	$15,001 - $50,000
	Federated Trust for Government	Purchase	12/31/99	$1,001 - $15,000
	Federated Trust for Government	Sold	12/31/99	$15,001 - $50,000
	Black Rock Fund 95	Sold	7/9/99	$1,001 - $15,000
	Fifth Third Bank (Exchanged for So Florida Bank)	Exchange	during 1999	$1,001 - $15,000
	Farmland Grazing Acreage--Rapidan, Virginia	Purchase	spring 1999	$250,001 - $500,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Board of Governors	Capitol Hill Club

1970

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Lindsey Olin Graham
(Full Name)

1429 Longworth HOB
(Mailing Address)
Washington DC 20515

Daytime Telephone: 202 225 5301

Filer Status	[X] Member of the U.S. House of Representatives	State: SC District: 03	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Lindsey Graham	5/14/00

1971

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None "	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Putnam New Opportunities Fund	$1,001 - $15,000	Dividends	$201 - $1,000	On the '98 FD this asset was mistakenly reported twice as two distinctly different entries: AG Edwards IRA and Putnam New Opp Fund. As a point of clarification, this asset was purchased by the brokerage firm AG Edwards.
Mass Mutual Life (SEP-IRA)	$15,001 - $50,000	Dividends	$201 - $1,000	NA

1972

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Goldman Sachs Trust MF	$1,001 - $15,000	Dividends	$201 - $1,000	NA
Pioneer Small Company MF	$15,001 - $50,000	Capital Gains	$1,001 - $2,500	NA
Putnam Health Sciences MF	$1,001 - $15,000	Capital Gains	$201 - $1,000	NA
MFS Emerging Growth MF	$15,001 - $50,000	Capital Gains	$201 - $1,000	NA
Compaq Computer Corp	$1,001 - $15,000	Dividends	$1 - $200	NA
DLR Gen Strypes	$1,001 - $15,000	Dividends	$1 - $200	NA
Staffmark, Inc	$1 - $1,000	Dividends	$1 - $200	NA
Zweig Total Return Fund	$1,001 - $15,000	Dividends	$1 - $200	NA
Live Oak Gen. MMF	$1,001 - $15,000	Interest	$1 - $200	Live Oak is a money market account
Mass. Investor Trust CL A	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	NA
VK Emerging Growth Fund	$1,001 - $15,000	Capital Gains	$201 - $1,000	NA
First Union Bank (checking/savings)	$1,001 - $15,000	Interest	$201 - $1,000	NA
Wright Patman Cong. Fed. Credit Union (checking/savings)	$1,001 - $15,000	Interest	$1 - $200	NA
Charles Schwab One Account	$1,001 - $15,000	Interest	$1 - $200	Held with Howell Clyborne who is responsible for managing funds for Graham
Loan receivable from "Committee to Elect Lindsey Graham"	$1,001 - $15,000	none	None	NA

1973

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Property at Cross Creek Plantation (undeveloped) --Seneca, SC	$15,001 - $50,000	none	None	not previously reported but owned since '93. The property is located at Cross Creek Plantation, lot #9, Block B, Seneca, SC.

1974

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C. 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D C.-Chicago-Wash , D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Owens Corning	March 1	Atlanta-Phoenix-DC	N	N	N	none
Sevier County, TN GOP	March 19-20	DC-Knoxville-Greenville	Y	Y	N	none
Washington County, AK GOP	April 30-May 1	DC-Fayettevill, AK-Augusta, GA	Y	Y	N	none
King County, WA GOP	June11-13	DC-Seattle, Wa	Y	Y	N	none
Mississippi GOP	October 1-2	DC-Memphis, TN	Y	Y	N	none
Duvall County, FL GOP	October 9-11	Myrtle Beach, SC-Jacksonville, FL-Greenville, SC	Y	Y	N	none
PolyEconomics Forum (Jude Wanniski)	Feb. 26-March 1	DC-W. Palm Beach-Atlanta	Y	Y	N	1 day on own

1975

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

N. Kay Granger
(Full Name)

6464 Brentwood Stair Road
(Mailing Address)

Fort Worth TX 76112

Daytime Telephone: 202/225-5071

Filer Status [X] Member of the U.S. House of Representatives — State: TX District: 12 — [ ] Officer or Employee — Employing Office:

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	X	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Kay Granger	6/13/00

1976

Name N. Kay Granger	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	G&R Insurance Agency, Inc., Ft. Worth, TX (formerly Kay Granger Insurance Agnecy, Inc.)	Policy renewal commissions	$64,384.00
	Blue Cross-Blue Shield of Texas	Policy renewal commissions	$16,566.00
	General American Life Insurance, St. Louis, MO	Policy renewal commissions	$481.00
	Golden Rule Insurance Co., Lawrenceville, IL	Policy renewal commissions	$400.00
	Jefferson Pilot Life Insurance Co., Greensboro, NC	Policy renewal commissions	$336.00
	Travelers Insurance Co.	Policy renewal commissions	$216.00

For payments to charity in lieu of honoraria, use Schedule II.

Name N. Kay Granger | Page___ of ____

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	Ft. Worth Star Telegram Star Scholars Banquet	Speech	May 12, 1999	$500.00
	Ft. Worth Women's Club	Speech	December 14, 1999	$75.00

Name N. Kay Granger | Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
Northwestern Mutual Retirement Fund	$15,001 - $50,000	Dividends	None	
6412 Locke, Ft. Worth, TX	$50,001 - $100,000	Rent	$2,501 - $5,000	
4702, 4704, 4706, 4708 Washburn; 1612, 1616 Kenley (a sixplex), Ft. Worth, TX	$250,001 - $500,000	Rent	$50,001 - $100,000	
G&R Insurance Agency, Inc.	$500,001 - $1,000,000	None	None	
3821, 3823 4th Street	$100,001 - $250,000	None	None	
Crescent Real Estate Stock	$50,001 - $100,000	None	$1,001 - $2,500	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	AmValue Fund	$15,001 - $50,000	None	None	S
	Templeton Foreign Fund	$15,001 - $50,000	None	None	S
	Cross Timbers Oil	$1,001 - $15,000	None	$1 - $200	S
	Antenna Products Stock	$1 - $1,000	None	None	S
	Texas Utilities	$15,001 - $50,000	Capital Gains	$201 - $1,000	S
	Seligman High Yield Bank Fund	$15,001 - $50,000	None	$201 - $1,000	S
	Pioneer Capitol Growth Fund	$15,001 - $50,000	None	None	S
	First National Bank of Texas	$15,001 - $50,000	Interest	$1 - $200	
	Jones Street Investments, Inc. (owns 715 Jones Street)	$100,001 - $250,000	None	None	
	Granger Real Estate Limited Partnership	$15,001 - $50,000	Rent	$2,501 - $5,000	
	Paine Webber Money Fund	$1 - $1,000	Dividends	$201 - $1,000	P
	White Oak Growth Stock Fund	$15,001 - $50,000	Dividends	None	P
	Managers International Equity Fund	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	P
	Davis New York Venture	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	P
	Dreyfus Midcap Index	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	P
	Royce Total Return Fund	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	P
	Lord Abbett Dev. Growth	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	P
	Pace Jones Money Market	$1,001 - $15,000	Dividends	$1 - $200	P
	Pimco Total Return	$15,001 - $50,000	Dividends	$201 - $1,000	P

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Name N. Kay Granger | Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Crescent Real Estate Stock	Sold	5/27/99	$50,001 - $100,000
	AmValue Fund	Sold	5/27/99	$15,001 - $50,000
	Templeton Foreign Fund	Sold	5/27/99	$15,001 - $50,000
	Cross Timbers Oil	Sold	5/27/99	$1,001 - $15,000
	Texas Utilities	Sold	5/27/99	$15,001 - $50,000
	Seligman High Yield Fund	Sold	5/27/99	$15,001 - $50,000
	Pioneer Capitol Growth	Sold	5/27/99	$15,001 - $50,000
	Paine Webber Money Fund	Purchase	5/27/99	$1,001 - $15,000
	Managers International Equity Fund	Purchase	5/27/99	$15,001 - $50,000
	Davis New York Venture	Purchase	5/27/99	$15,001 - $50,000
	Dreyfus Midcap Index	Purchase	5/27/99	$1,001 - $15,000
	Royce Total Return Fund	Purchase	5/27/99	$1,001 - $15,000
	Lord Abbett Dev. Growth	Purchase	5/27/99	$1,001 - $15,000
	Pace Jones Money Market	Purchase	5/27/99	$1,001 - $15,000
	Pimco Total Return	Purchase	5/27/99	$15,001 - $50,000
	White Oak Growth Stock Fund	Purchase	5/27/99	$15,001 - $50,000

Name N. Kay Granger	Page ____of____

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	First National Bank of Texas at Eastchase, Ft. Worth, TX	Mortgage on 6412 Locke, Ft. Worth, TX	$50,001 - $100,000
	Bank One, Ft. Worth, TX	Mortgage on sixplex properties at 4702, 4704, 4706, 4708 Washburn; 1612, 1616 Kenley, Ft. Worth, TX	$100,001 - $250,000
	Bank One, Ft. Worth, TX	Business loan to Jones Street Investments, Inc.	$250,001 - $500,000
	Jacqueline Frazer, 3820 W. 7th St., Ft. Worth, TX 76107	Mortgage on 3821, 3823 Fourth St., Ft. Worth, TX	$50,001 - $100,000

Name	Page ____ of ____

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name N. Kay Granger | Page ____ of _____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Burlington Northern Santa Fe	January 7-10, 1999	Ft. Worth, TX to Los Angeles, CA to Albuquerque, NM, to Ft. Worth, TX	Y	Y	N	0
Association of American Railroads	January 10-12, 1999	Ft. Worth, TX, to Phoenix, AZ, to Ft. Worth, TX	Y	Y	N	0
Lockheed Martin	January 23-27, 1999	Ft. Worth, TX to Athens, Greece, to Ft. Worth, TX	Y	Y	N	0
TX General Counsel Group	September 10, 1999	Ft. Worth, TX to San Antonio, TX to Ft. Worth, TX	N	Y	N	0
Information Technology Council	November 14-15, 1999	Ft. Worth, TX to Austin, TX to Ft. Worth, TX	Y	N	N	0
TX Governor's Commission For Women	March 4-5, 1999	Ft. Worth, TX to Austin, TX to Ft. Worth, TX	Y	Y	N	0

Name N. Kay Granger	Page____ of _____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
President	G&R Insurance Agency, Inc., Ft. Worth, TX (formerly Kay Granger Insurance Agency, Inc.)
Member of the Board	Longhorn Council of Boy Scouts
Member of the Board	First United Methodist Church, Ft. Worth, TX
Member of the Board of Trustees	Texas Wesleyan University
Member of the Developmental Council	Texas A&M University Business Development Council
Member of the Advisory Board	The Oakridge School, Arlington, TX
Member of the Board	AIDS Outreach Advisory Board, Ft. Worth, TX
Member of the Board	Caring for Children
Member of the Board	Wednesday's Child Benefit Corporation
Member of the Advisory Board	Open Arms
Member of the Board	Strategy 2000
Member of the Public Policy Board	United Way
Member of the Advisory Board	Schola Cantorum
Member of the Board	Juvenile Diabetes Foundation of Tarrant County
Member of the Board	Tarrant Area Food Bank
Member of the Board	Horses and America's Youth (HAY)
Member of the Advisory Board	Girls Choir

1985

Name N. Kay Granger | Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1999	I continue to receive commissions from policies sold before my election to Congress, and I am covered by the health plan from G&R Insurance Agency, Inc. (formerly Kay Granger Insurance Agency, Inc.), Fort Worth, TX	NA

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
00 MAY 11 AM 9:10
HAND DELIVERED
(Office Use Only)

Mark Andrew Green
(Full Name)

2152 Gloucester Dr., Green Bay, WI 54304
(Mailing Address)

(920) 497-0733
Daytime Telephone

Filer Status	☑ Member of the U S House of Representatives	State WI District 08	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☑	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mark Green	05-10-00

1987

Name	Mark Green	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

1988

Name	Page 3 of 9
Marie Green	

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$500

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Name Mark Green | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A		Block B		Block C		Block D		Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples	SP	Mega Corp. Stock				X								X																		P
			Simon & Schuster		Indefinite																Royalties				X					X			
			1st Bank of Paducah, KY accounts					X									X										X					
	LMG Property Management (a Wisconsin general partnership holding title to 3 rental properties. Green holds 1/3 interest in partnership)																																
	1825-27 Frank St., Green Bay						X									X								X									
	1790 7th St, Green Bay						X									X								X									
	408-410 Steven St., Green Bay						X									X								X									
	Kemper Municipal Bond Fund				X										X		X							X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Mark Green

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Flex Funds Money Mkt Fund				X									X		X							X									
	Kemper Total Return Fund (IRA)			X										X		X							X									
	American Funds Group																															
	Europacific Growth Fund				X									X		X								X								
	Growth Fund of America					X								X		X									X							
	Washington Mutual Fund				X									X		X								X								
	American Legacy Annuity				X											X									X							
	Mass Investors Growth Stock			X										X			X						X									
	Gannet Stock			X										X			X					X										
	Wisconsin Retirement System			X										X			X						X									
	Godfrey + Kahn, S.C. 401K (administered by Robert W Baird Co)				X											X	X							X								
	Wisconsin Deferred Comp. Plan																															
	Vanguard Institutional Index				X									X		X									X							
	Fidelity Contra fund				X									X		X								X								
	Janus Fund				X									X		X									X							

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Name Mark Green

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Note: During 1999, accrued benefit of Godfrey Kahn, S.C. 401K Plan was transferred to Robert W Baird Co. as successor trustee. Amount transferred was less than $22,000														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Associated Bank Green Bay	Mortgage on 3 rental properties for LMG Property Management				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
—		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	—						

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	LMG Property Management, a Wisconsin general partnership

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2000 62-753 (mac)

Use additional sheets if more space is required.

MARK GREEN
8TH DISTRICT, WISCONSIN

ASSISTANT MAJORITY WHIP

COMMITTEE ON BANKING AND FINANCIAL SERVICES

COMMITTEE ON THE BUDGET

COMMITTEE ON SCIENCE

REPUBLICAN POLICY COMMITTEE

CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES

June 8, 2000

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HOUSE OF REPRESENTATIVES

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MC

Jeff Trandahl
Clerk
United States House of Representatives
The Capitol, Room H-154
Washington, DC 20515-6601

Dear Mr. Trandahl,

Please accept the enclosed "Schedule IV" as a replacement page for my recently filed Financial Disclosure Statement for calendar year 1999.

Based on conversations with Ms. Susan Pohl from the Committee on Standards of Official Conduct, I am providing this additional information to supplement my previous answers for Schedule IV.

Please make this a part of my permanent file. If you have any questions or concerns please call me at 202-225-5665.

I appreciate your assistance with this matter.

Sincerely,

Mark Green
Member of Congress

1218 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-5665

700 EAST WALNUT STREET
GREEN BAY, WI 54301
(920) 437-1954

609A WEST COLLEGE AVENUE
APPLETON, WI 54911
(920) 380-0061

837 CLERMONT STREET
ROOM 112
ANTIGO, WI 54409
(715) 627-1511

TOLL FREE IN WISCONSIN (800) 773-8579
www.house.gov/markgreen

PRINTED ON RECYCLED PAPER

SCHEDULE IV — TRANSACTIONS

Name Mark Green Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Note: During 1999, accrued			X			X								
	benefit of Godfrey & Kahn, S.C. 401K														
	Plan was transferred to Robert														
	W Baird Co. as successor trustee.														
	Amount transferred was less than														
	$22,000														
	- Washington Mutual Fund	X			5/28/99	X									
	- 20th Century American Growth Fund was														
	exchanged for equal amount of Janus Fund			X	12/15/98		X								
	- Massachusetts Investors Growth Fund was	X				X									
	initiated in 1999; additional contributions														
	in 4 payments totally $4,000														
	- Flex Funds Money Market Account	X			Monthly 7-12/99		X (total for year)								

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Raymond Eugene (Gene) Green
(Full Name)

P O Box 16128
(Mailing Address)
Houston TX 77222-6128

Daytime Telephone: 202-225-1688

Filer Status	[X] Member of the U.S. House of Representatives	State: TX District: 29	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (I e , aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C.app. 4, 104 and 18 U.S.C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Raymond Eugene (Gene) Green

DATE (Month/Day/Year): 4/19/2000

1998

Name Raymond Eugene (Gene) Green	Page 1 of 1

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State State of Maryland Civil War Roundtable (Oct. 2nd) Ontario County Board of Education	Approved Teaching Fee Legislative Pension Spouse Speech Spouse Salary	$10,000 $9,000 $1,000 NA
	Employees Retirement System of Texas	Legis. Pension	$38,703.00
	State of Texas	Deferred Comp.	$2,000.00
	Aldine Independent School District	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

1999

Name Raymond Eugene (Gene) Green

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source		Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1998 Aug. 13, 1998	$2,000 $ 500
American Society of Anesthesiologists		Speech	April 28, 1999	$1,500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed* provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account and provide its value at the end of the reporting year. **Exclude:** Your personal residence(s) (unless there rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC JT	*Examples:* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT		First American Bank (Deferred Comp)	$1,001 - $15,000	Interest & Income	$1,001 - $2,500	
JT		Bank of America	$50,001 - $100,000	Interest	$1,001 - $2,500	
JT		Chase Bank (IRA's)	$50,001 - $100,000	Interest	NA	
JT		Aldine Teachers' Credit Union	$1,001 - $15,000	Interest	$201 - $1,000	
DC		Bank of America	$1,001 - $15,000	Interest	$201 - $1,000	
DC		Bank of America	$1,001 - $15,000	Interest	$201 - $1,000	

2001

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Prudential Insurance	$50,001 - $100,000	Interest & Spouse Deferred Comp	$5,001 - $15,000	
JT	Planters Bank (IRA's)	$50,001 - $100,000	Interest	NA	
JT	20.049 Acres Rural Land, Montgomery, TX	$15,001 - $50,000	None	None	

2002

Name Raymond Eugene (Gene) Green | Page 1 of 1

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
AiC Worldwide (Speech/Conference)	Jan 20-21	DC-San Antonio-Hou	Y	Y	N	None
Aspen Institute (Congressional Retreat)	Mar 19-21	DC-Hershey-DC	Y	Y	Y	None
Natl Cable TV Assn (Fact-finding)	June 12-14	Hou-Chicago-DC	Y	Y	Y	None
Project Interchange (Fact-finding)	Aug 21-29	Hou-Israel-Hou	Y	Y	Y	None

2003

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Organization
Major	Texas State Guard (Uncompensated)

2004

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
5/90	International Typographical Union	Pension Upon Retirement

2005

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

James Charles Greenwood
(Full Name)

2436 Rayburn House Office Building
(Mailing Address)
Washington DC 20515

Daytime Telephone: 202-225-4276

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 08	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions. (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James C. Greenwood	5-15-00

2006

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Bucks County, Pennsylvania	Spouse salary	NA
	Commonwealth of Pennsylvania	Pension for House & Senate service	$5,448.00

For payments to charity in lieu of honoraria, use Schedule II.

2007

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A Asset and/or Income Source	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Wheat, First Union IRA (self-directed):				
	Bonds - Refco strips	$1,001-$15,000	Interest	$1-$200	
	Bonds - Certificate Accrual Treasury Securities	$1,001-$15,000	Interest	$1-$200	
	Mutual Funds - Evergreen Capitol Growth	$1,001-$15,000	Capitol Gains	$201-$1,000	
	Mutual Funds - Evergreen Growth Class BL	NONE	Dividends	$1-$200	S
	Mutual Funds - Evergreen Growth Fund	$1,000-$15,000	Capitol Gains	$201-$1,000	

2008

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description iin this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Mutual Funds - Evergreen Perpetual Global Fund	$1,001 - $15,000	Capital Gains	$1,001 - $2,500	
Stock - Jade Financial	$1,001 - $15,000		NONE	P

2009

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Mutual Funds - Evergreen Growth Class BL	Sold		$1 - $200
	Stock - Jade Financial	Purchase		$1,001 - $15,000

2010

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Republican Pro-Choice Coalition	February 6 - 8	Newport News, VA - West Palm Beach, FL - Philadelphia, PA	Y	Y	N	None
Congressional Economic Leadership Institute	March 26 - April 1	Washington, DC - Florence, Italy - Roome, Italy - Philadelphia, PA	Y	Y	Y	No
The Ripon Society	August 13 - 20	Philadelphia, PA - Stockholm, Sweden - Philadelphia, PA	Y	Y	Y	None
American Cancer Society	December 2 - 3	Philadelphia, PA - New Orleans, LA - Philadelphia, PA	Y	Y	Y	None

2011

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Director (unpaid)	Bucks County (PA) County on Alcoholism
Director (unpaid)	The Woods Schools

2012

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

Luis V. Gutierrez (Full Name) (202) 225-8203

1934 W. Wabansia (Mailing Address) (773) 509-0999 (Daytime Telephone)

Chicago, Illinois 60647

Filer Status	[X] Member of the U.S. House of Representatives — State: Illinois District: 4th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Luis V. Gutierrez	5-12-00

2013

Name	Luis V. Gutierrez	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Second Federal Savings & Loan Association	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

2014

Name Luis V. Gutierrez

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P S E
SP	SP Mega Corp Stock	E: X	DIVIDENDS: X	IV: X	P
DC Examples	Simon & Schuster	Indefinite	Other Type of Income: Royalties	VIII: X	
JT	1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: X	
JT	Liberty Bank CD	E: X	INTEREST: X	IV: X	P (CD)
JT	2nd Federal Bank CD	E: X	INTEREST: X	V: X	P (CD)
JT	615 Caye Vista Mar Coco Beach, Rio Grande, PR	E: X	RENT: X	VI: X	

For additional assets and unearned income, use next page.

2015

Name Luis V. Gutierrez | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
JT	Doral Financial Corporation, SanJuan, P.R.	Mortgage on 615 Calle VistaMar			x							
		Coco Beach, Rio Grande, P.R.										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Luis V. Gutierrez | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Congressional Hispanic Caucus Institute	(1/19) to (1/21) 2000	Chicago to P.R. --Chicago	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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(6)

Rep. Gil Gutknecht
(Full Name)
425 Cannon Office Bldg.
Washington, D.C. 20515
(Mailing Address)
202-225-2472
Daytime Telephone

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: Minnesota District: 1st	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gil Gutknecht	May 10, 2000

2018

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Aldrich Nursery School	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

2019

Name Gil Gutknecht | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples	SP	Mega Corp Stock					X							X										X								P
			Simon & Schuster	Indefinite																	Royalties									X			
			1st Bank of Paducah, KY accounts						X								X									X							
JT	AT+T, stock					X									X									X									
JT	Bell South, stock														X										X								
JT	Affinity Plus (cred. union)																X								X								
JT	Norwest Bank																X							X									
	Eastenal, stock IRA				X										X								X										
	Daimler Chrysler, IRA				X										X									X									

For additional assets and unearned income, use next page.

2020

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gil Gutknecht

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Templeton Growth, IRA	D	reinvested	NA	
	Oppen. Main St. Inc. + Gr. IRA	C	reinvested	NA	
	Dean Witter Lig. Asset, IRA	C	INTEREST	III	
SP	Berger 100 mutual, IRA	C	reinvested	NA	
SP	Templeton Growth, IRA	C	reinvested	NA	
SP	Schwab money mkt, IRA	B	INTEREST	III	
JT	Lucent Tech.	D	DIVIDENDS	III	
JT	Fastenal	C	DIVIDENDS	III	
JT	Showcase Software	C	Other Type of Income: none	I	P
	MN State Ret. Sys. - def. comp. (Gr. West Life + Annuity)	D	CAPITAL GAINS	NA	
	MN State retirement - legislative pension	No specific value		NA	
SP	Teacher's Insurance + Annuity Assn. - retirement	C	CAPITAL GAINS	NA	
	garage - rent	C	RENT	IV	

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2021

SCHEDULE IV — TRANSACTIONS

Name Gil Gutknecht

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	Western Digital	X			3-8-99	X									
JT	Western Digital		X		7-27-99	X									
JT	Showcase Corp.	X			7-27-99	X									

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2022

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	GERMAN MARSHALL FUND/ US ASSOC OF FORMER MCS	MAR 27-APR. 2	ROCHESTER, MN – GERMANY – ROCHESTER, MN	Y	Y	N	N
	CHICAGO BOARD OF TRADE	MAR. 18-21	WASHINGTON, DC – BOCA RATON, FL – ROCHESTER, MN	Y	Y	N	N
	HY-VEE FOODS	JAN. 13	ROCHESTER, MN – DES MOINES, IA – ROCHESTER, MN	N	Y	N	N

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2023

GIL GUTKNECHT
1ST DISTRICT, MINNESOTA

INSIDE MAIL

Congress of the United States
House of Representatives
Washington, DC 20515–2301

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U.S. HOUSE OF REPRESENTATIVES

1

MC ✓

June 6, 2000

Mr. Jeff Trandahl
Clerk, US House of Representatives
H-154, Capitol
Washington, D.C. 20515

Dear Mr. Trandahl:

Pursuant to a request from the Committee on Standards of Official conduct, this letter is to clarify some omissions on my 1999 Financial Disclosure Statement which was filed with your office last month.

On Preliminary Information Question VII which I inadvertently left blank, the answer should be "Yes."

With regard to Schedule III, the asset values are as follows:

Bell South, Category E
Affinity Plus Credit Union, Category D
Norwest Bank, Category D

The address of the garage I rent out is 305 C Street, NE, #10, Washington, D.C. 20002.

Thank you for your attention to this matter.

Sincerely,

Gil Gutknecht

Gil Gutknecht
Member of Congress

WASHINGTON OFFICE
425 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–2301
(202) 225–2472
(202) 225–3246 FAX
gil@mail.house.gov
www.gil.house.gov

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MIDWAY OFFICE PLAZA
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ROCHESTER, MN 55902
(507) 252–9841
(507) 252–9915 FAX
IN MN: 1–800–862–8632 TOLL FREE

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL
(Office Use Only)

Ralph M. Hall
(Full Name)

2221 Rayburn House Office Building
Washington, DC
(Mailing Address)

(202) 225-6673
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State Texas District 04	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ralph M. Hall	5-8-00

2025

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Employee Retirement System of Texas	Legislative Pension	$51,991

For payments to charity in lieu of honoraria, use Schedule II.

2026

Name Ralph M. Hall

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	Securities:																															
	Crowley Holding Co. Crowley, Tx							X						X													X					
	Lakeside Bancshares, Inc. Rockwall, Tx								X					X													X					
	Lakeside National Bank Rockwall, Tx				X									X										X								
	North & East Trading Co. Rockwall, Tx						X														X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ralph M. Hall

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Real Estate:																															
	152 A. Hunt Co., Texas						X														X											
	105 S. Fannin, Rockwall,Tx					X															X											
	5 A. Rockwall, Tx.						X														X											
	D.C. Townhouse						X														X											
	Oil Interest:																															
	Caddo Parrish, La.			X																	X											

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Lakeside National Bank, Rockwall, Tx	Business Loans, Commercial Building				X						
	American Bank, Sherman, Tx	Bank Stock				X						
	Community Bank, Rockwall, Tx	152 A., Hunt Co., Tx			X							
	J.T. Turner Construction Co., Greenville,Tx	5 A., Rockwall Co., Tx				X						
	Lloyd Wilcox, Rockwall, Tx	Lakeside Bancshares		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

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Name	Ralph M. Hall	Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Loretta Myers, Rockwall, Tx	Lakeside Bancshares			X							
	E.K. Slaughter, Rockwall, Tx	Crowley Holding Co.			X							
	Rosemary Scott, Rockwall, Tx	Business Borrowings	X									
	Hugh Hall, Rockwall, Tx	Business Borrowings	X									
	Flagstar Bank, Irving, Ca	D.C. Townhouse			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Ralph M. Hall	Page 7 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Speaking Engagement Edison Electric Institute	Jan 7-8	Wash.,D.C.-Phoenix-Dallas	Y	Y	N	N
	Committee Hearings Tenn Valley Authority	Sept 13	Nashville-Wash., D.C.	N	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Chairman & Director (unpaid)	Crowley Holding Company, Crowley, Tx
Chairman & Director (unpaid)	Bank of Crowley, Crowley, Tx
Chairman & Director (unpaid)	Lakeside National Bank, Rockwall, Tx
President & Director (unpaid)	Lakeside Bancshares, Inc., Rockwall, Tx
Chairman & President (unpaid)	North & East Trading Co., Rockwall, Tx
Chairman & Director (unpaid)	Linrock, Inc., Rockwall, Tx

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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MC
HAND DELIVERED
(Office Use Only)

Tony P. Hall
(Full Name)

2560 North 23rd Road
(Mailing Address)

Daytime Telephone
202-225-6405

Arlington, VA. 22207

Filer Status	[X] Member of the U S House of Representatives	State Ohio District 3rd	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ty P. Hall	5-9-00

2033

Name	Tony P. Hall	Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Fellowship Foundation, Inc. Arlington, VA.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Tony P. Hall

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction
SP	Mega Corp Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties								X				
JT	1st Bank of Paducah, KY accounts						X									X										X						
JT	R.O. Assoc. (1.98% Lt. Part)			X																(passive) Part. Inc	X											S
	Cong. Emp. Fed. Cred. Union			X												X						X										
SP	Aim Invest. Funds Tel. IRA			X										X									X									
SP	Smith Bar. Shear. App. Fund			X										X										X								
	" " " " " "			X										X									X									
	Aim Invest. Funds Tel. IRA			X										X										X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Tony P. Hall

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Chemical Bank Note IRA			X												X						X										
	Prudential Moneymart"			X										X								X										
DC	Wendy's Mattel Techicl-one Intl. Stocks			X										X								X										
JT	Amer. Elect. Power Stock			X										X								X										
JT	First Union Corp. "			X										X								X										
JT	IBM Stock			X										X								X										
JT	Royal Dutch Petro Stock			X										X								X										
JT	Prudential Gov. US Tres. Mon Mar			X										X								X										P
JT	Projectavision Stock	(no longer reportable)																														

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Name Tony P. Hall

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–99		X								
JT	R.O. Assoc.(1.98% Lt.Part.)		X		2/1/99	X									
JT	Prudential Gov. US Tres. Money Market	X			Various	X									

This page may be copied if more space is required.

Name	Tony P. Hall	Page 6 of 8

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Westmont College	Jan. 23-26	Wash. DC-Santa Barbara, CA-Wash. DC	N	N	N	N
	The Aspen Institute	Mar. 19-21	" " -Hershey, PA- "	Y	Y	Y	N
	International Foundation	Aug. 31-Sep. 4	" " Thessaloniki, Greece "	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Chairman	Congressional Hunger Center
Director	Bread For The World
Trustee	Holiday Aid
Board of Managers	Air Force Museum Foundation
Advisory	Mercy Corps International
Advisory	International Justice Mission

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Center For Effective Compassion
Advisory	National Bureau of Asian Research

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY -8 PM 12:59

James V. Hansen
(Full Name)

242 Cannon House Office Building
(Mailing Address)

(202) 225-0453
Daytime Telephone

Washington, D.C. 20515

3

MC APR 28 2000
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives — State District: Utah 1st	[ ] Officer or Employee — Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	James V. Hansen	04-27-00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State Farm Insurance Company	Pension	$ 4185.72
	State of Utah	Legislative Pension	$ 2225.40

For payments to charity in lieu of honoraria, use Schedule II.

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Name James V. Hansen

Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction P, S, E
SP, DC, JT	*Examples* SP Mega Corp Stock					X								X										X							P
	Simon & Schuster		Indefinite																	Royalties								X			
	1st Bank of Paducah, KY accounts						X									X									X						
JT	Office Bldg. at 60 South 200 West, Farmington, UT						X								X										X						
JT	Building Lots (3), Woodland Springs, Plat A Farmington, UT						X														X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name James V. Hansen

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Wright-Pat. Credit Union			X												X							X									
JT	Mountain America Credit Union			X												X						X										
JT	America First Credit Union			X												X							X									
JT	United States Savings Bonds				X											X						X										
JT	Davis Schools Credit Union			X												X							X									

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Zions First National Bank	Mortgage on rental office at 60 South 200 West, Farmington UT		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE.		

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

J. DENNIS HASTERT (Full Name)

H-232, THE CAPITOL (Mailing Address) 202-225-0600 (Daytime Telephone)

WASHINGTON, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State IL District 14	[ ] Officer or Employee — Employing Office	A ***$200 penalty*** **shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dennis Hastert	5/15/00

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Yorkville, Illinois School District #115	Spouse salary	NA
	State of Illinois Pension Fund (former State Legislator)	Legislative Pension	$27,625

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A		Block B												Block C						Block D											Block E
			None	A $1 – $1,000	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	None	I $1 – $200	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX $1,000,001 – $5,000,000	X Over $5,000,000	XI	P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X							P
			Simon & Schuster		Indefinite																Royalties								X			
			1st Bank of Paducah, KY accounts														X									X						
JT	Yorkville National Bank, IL																															
	Personal Account				X												X						X									
	Farm Account				X												X						X									
JT	Farm, RR 1, Shipman, IL (270 Acres)							X							FARM				INCOME			X (NET					X (Gross)					
	Congressional Federal Credit Union				X												X						X									

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Opera House Property 500 Lockport St.						X								X						X						X					
																						(Net)						(Gross)				
																X								X								
JT	Townhouse, Capitol Park II Washington, DC						X								X										X							
	Northwest Mutual Life (IRA)			X										X		X	X															
SP	Northwest Mutual Life (IRA)			X										X		X	X															
	Bank One Stock (Inherited)				X																X											
	Tollgate Property N. Aurora, IL (Inherited in 1999 ½ Interest)					X										X	X					X										
																X						X										

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SCHEDULE IV — TRANSACTIONS

Name J. DENNIS HASTERT

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001– $15,000	C $15,001– $50,000	D $50,001– $100,000	E $100,001– $250,000	F $250,001– $500,000	G $500,001– $1,000,000	H $1,000,001– $5,000,000	I $5,000,001– $25,000,000	J $25,000,001– $50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock				10-12-99		X								
	Opera House Property	X			1-1-99		X								
	Tollgate Property (Inherited and sold on installment sale contract)				7-7-99				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	First Midwest Bank, Joliet, IL	75% Interest by opera House Property			X							
JT	Federal Land Bank	Mortgage farm Property Shipman, IL			X							
	Yorkville National Bank	Cosign Loan with Relative for home repair	X									
	Yorkville National Bank	Cosign restaurant Loan with relative				X						
	Martin Nelson, Dekalb, IL	Cosign Loan with Relative			X							
	Yorkville National Bank	Cosign Loan with Relative		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Name J. Dennis Hastert | Page 7 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	BB&T, North Carolina	Mortgage, DC Townhouse			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr Joseph H Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
75% Partner	Opera House Property
50% Partner	Tollgate Property

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 10 PM 4:52
OFFICE OF THE CLERK
(4)
HAND DELIVERED
MC
(Office Use Only)

The Honorable Alcee L. Hastings
(Full Name)

2235 Rayburn House Office Building
Washington, DC 20515
(Mailing Address)

Daytime Telephone 202-225-1313

Filer Status	[X] Member of the U.S. House of Representatives — State FL District 23	[ ] Officer or Employee — Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Alcee L. Hastings	5/10/2000

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Name The Honorable Alcee L. Hastings | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, or E)
SP, DC, JT	*Examples*				
SP	Mega Corp Stock	E	DIVIDENDS	IV	P
DC	Simon & Schuster	Indefinite	Royalties	IX	P
JT	1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	5602 N.W. Terr. Miami, FL (1)	K	(Property sold at loss of $15,000)		S

For additional assets and unearned income, use next page.

Name The Honorable Alcee L. Hastings | Page . of .

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Robert Catz	Legal Fees						X				
	Terrence Anderson	Legal Fees							X			
	Patricia Williams	Legal Fees						X				
	Karr & McClan	Legal Fees				X						
	Mark McDonald	Legal Fees		X								
	Lewis Meyer	Legal Fees		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Page of
The Honorable Alcee L. Hastings	

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	American Boiler Manufacturers Ass.	June 21,1999	Wash., D.C. - Orlando - Wash., D.C.	Y	Y	N	N
	The Connell Company	July 16, 1999	Wash., D.C. - Westfield, N.J. - Wash., D.C.	Y	Y	N	N
	NAACP	Oct. 15, 1999	Wash., D.C. - Norwich, CT- Wash., D.C.	Y	Y	N	N
	Florida Medical Association	October 16, 1999	Wash., D.C. - Tampa, FL- Wash., D.C.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 24 PM 1:56

(3)
HAND DELIVERED
(Office Use Only)

The Honorable Alcee L. Hastings
(Full Name)

2235 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone 202-225-1313

Filer Status	[X] Member of the U S House of Representatives — State FL District 23	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**		X
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**		X
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Alcee L. Hastings	5/24/2000

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SCHEDULE IV — TRANSACTIONS

Name Alcee L. Hastings

Page ___ of ___

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	5602 N.W. 206 Terr. Miami, FL (1/2)		X				X (Property Sold at Loss of $15,000)								

This page may be copied if more space is required.

Name Alcee L. Hastings | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period; and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A Asset and/or Income Source		BLOCK B Value of Asset: None	A $1 – $1,000	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK D Amount of Income: None	I $1 – $200	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX $1,000,001 – $5,000,000	X Over $5,000,000	XI	BLOCK E Transaction: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock			X									X										X									P
			Indefinite Simon & Schuster					X													Royalties									X				
			1st Bank of Paducah, KY accounts		X												X										X							
	5602 N.W. 206 Terr. Miami, FL (1)			X																														S

For additional assets and unearned income, use next page.

2060

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers and employees

00 MAY 15 PM 4:00

(2)

HAND DELIVERED

(Office Use Only)

DOC HASTINGS
(Full Name)

P.O. BOX K
(Mailing Address)

PASCO, WA 99302
Daytime Telephone
202-225-5816

Filer Status	[X] Member of the U.S. House of Representatives — State WA District 04	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	5 May 00

2061

Name DOC HASTINGS | Page 2 of 2

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source		Value of Asset (Block B)	Type of Income (Block C)	Amount of Income (Block D)	Transaction (Block E)
SP, DC, JT	*Examples.*	SP: Mega Corp Stock	Indefinite	DIVIDENDS: X		P
		Simon & Schuster				
		1st Bank of Paducah, KY accounts	X (F)	INTEREST: X	X (VI)	
JT	COLUMBIA BASIN PAPER & SUPPLY TRUST - PETERSEN & HASTINGS		X (H)	Other Type of Income (Specify For Example, Partnership Income or Farm Income): RETIREMENT PLAN	X (IX)	
JT	YAKIMA FEDERAL - DEPOSIT		X (C)	INTEREST: X	X (II)	
JT	1st VIRGINIA - DEPOSIT		X (C)	INTEREST: X	X (II)	
JT	CHAS SCHWAB - IRA		X (D)	DIVIDENDS: X	X (III)	

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 6:25

(18)

HC HAND DELIVERED
(Office Use Only)

ROBERT CANNON HAYES
(Full Name)

PO BOX 2000 CONCORD, NC 28026 (704)795-2000
(Mailing Address) Daytime Telephone

Filer Status [X] Member of the U S House of Representatives State NC District 8 [ ] Officer or Employee Employing Office

Report Type [X] Annual (May 15) [ ] Amendment [ ] Termination Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert Cannon Hayes	5/15/00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ARTIC SOUTHERN ENTERPRISES; CONCORD, NC	PROPRIETORSHIP GROSS INCOME	$4,200

For payments to charity in lieu of honoraria, use Schedule II.

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Name ROBERT CANNON HAYES

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	DC Simon & Schuster		Indefinite																	Royalties									X			
	JT 1st Bank of Paducah, KY accounts						X									X									X							
JT	FIRST UNION NATIONAL BANK; ACCOUNTS						X									X								X								
SP	FIRST UNION NATIONAL BANK; ACCOUNTS			X												X								X								
JT	CABARRUS BANK OF NC; ACCOUNTS					X										X								X								
	FIRST CHARTER NATIONAL BANK; ACCOUNTS			X												X						X										
JT	CENTRAL CAROLINA BANK & TRUST; ACCOUNTS			X												X						X										
	AGRI BIOTECH INCORP.; STOCK			X												(LOSS)					X											P.S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ROBERT CANNON HAYES

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction P, S, E
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	
	BERKSHIRE HATHAWAY B; STOCK	C		I	
	SOLECTRON CP; STOCK	E		I	
SP	AGRI BIOTECH INCORP.; STOCK	D		I	
SP	BB&T CORP.; STOCK	D	DIVIDENDS	III	
SP	CONOCO INC. CL A; STOCK	D	DIVIDENDS	III	
SP	FANNIE MAE; STOCK	C	DIVIDENDS	III	
SP	LANCER CP STOCK; STOCK	C		I	
	MT. PLEASANT HOSIERY MILL BLDG.; 1467 N. MAIN ST MOUNT PLEASANT, NC 28124	E	RENT	VI (GROSS)	
	RICHFIELD PROPERTY, CULP ROAD RICHFIELD, NC 28137	G		I	
	WISCONSIN PROPERTY, CLINIC ROAD BREED, WI	D		I	
	HWY 29 - 5.2 ACRES MECKLENBURG CO., NC	A	CAPITAL GAINS	IX	S
	.3 ACRES - RIGHT OF WAY, HWY 29 MECKLENBURG CO., NC	A		V	S
JT	3.328 ACRES, CRESTSIDE CONCORD, NC 28025	E		I	P
	AIRPLANE CONCORD, NC 28025	H	RENT	I (NET); IX (GROSS)	P
	MOUNT PLEASANT HOSIERY, INC.; STOCK	H		I	
JT	LEMMON/RUSINSKI I, LP	C	INTEREST	II	
	TRUST - CA CANNON DTD 12-5-51 (SEE SCHEDULE III, ATTACHMENT A)	I	DIVIDENDS; INTEREST	IX	
	TRUST - CA CANNON DTD 5-12-53 (SEE SCHEDULE III, ATTACHMENT B)	J	DIVIDENDS; INTEREST	VI	
	TRUST - CA CANNON 1321 TRUST (SEE SCHEDULE III, ATTACHMENT C)	K	DIVIDENDS; INTEREST	X	

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SCHEDULE IV — TRANSACTIONS

Name ROBERT CANNON HAYES

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	AGRI BIOTECH INCORP., STOCK	X	X		9/27/99 PURCHASE 10/25/99 SALE		X								
	REAL ESTATE - HWY 29 MECKLENBURG CO., NC		X		7/12/99					X					
	RIGHT OF WAY - HWY 29 MECKLENBURG CO., NC		X		8/19/99	X									
JT	REAL ESTATE CONCORD, NC 28025	X			6/21/99			X							

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Name ROBERT CANNON HAYES | Page 6 of 8

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	FIRST UNION NATIONAL BANK; CHARLOTTE, NC	COMMERICAL LOAN					X					
	FIRST UNION NATIONAL BANK; CHARLOTTE, NC	REAL ESTATE INVESTMENT LOAN			X							
	WACHOVIA BANK; ATLANTA, GA	COMMERCIAL LOAN - AIRPLANE						X				
	CENTRAL CAROLINA BANK, DURHAM, NC	COMMERICAL LOAN				X (PAID OFF 7/99)						
	MORGAN STANLEY DEAN WITTER	MARGIN LOAN		X								

SCHEDULE VI — GIFTS NONE

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	THE COMMONWEALTH FUND TO HARVARD UNIV.	JAN. 21-24	WASHINGTON, D.C. TURNBERRY ISLE, FL - CHARLOTTE, NC	Y	Y	Y	N
	AMERICA TEXTILES MANUFACTURES	MARCH 11-15	WASHINGTON, D.C. LOS ANGELES, CA - WASHINGTON, D.C.	Y	Y	Y	N
	ASPEN INSTITUTE	MARCH 19-21	WASHINGTON D.C. HERSHEY, PA - CHARLOTTE, NC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
PRESIDENT, DIRECTOR	MOUNT PLEASANT HOSIERY MILL, INC.

SCHEDULE IX — AGREEMENTS NONE

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 7000 62 753 (mat.)

Use additional sheets if more space is required.

May 12, 2000

To Whom It May Concern:

Mr. Hayes earns a fraction of the income generated from these trusts. Securities and other assets held in these trusts are for the benefit of future owners, not Mr. Hayes.

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1019854809

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
DTD 12-5-51

		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
TEMPORARY INVESTMENTS					
	EVERGREEN SELECT MUNICIPAL MONEY MARKET FUND CL I	91,856.65	91,856.65	4,638.76	5.0
	TOTAL	91,856.65	91,856.65	4,638.76	5.0
MUNICIPALS					
50,000	CHARLOTTE NC BD DTD 8/1/98 OID PUB IMPT SER A (C 2/1/2008 @ 102) 4.75% 02/01/2013-2008	49,461.00	45,659.00	2,375.00	5.2
50,000	CHARLOTTE NC MTR & SWR BD DTD 8/1/91 BEO UT (P/R @ 102; O/M 2/1/2005) REFUNDED FROM AN ISSUE DTD 7/15/93 6.5% 02/01/2005-2001	50,318.50	52,148.50	3,250.00	6.2
50,000	DURHAM CNTY N C BD DTD 2/1/92 BEO UT (C 2/1/2002 @ 102) 5.75% 02/01/2006-2002	49,762.00	51,848.00	2,875.00	5.5
100,000	DURHAM CNTY N C BD DTD 2/1/92 BOOK ENTRY (CALL 2/1/2002 @ 102) 5.75% 02/01/2010-2002	95,727.00	103,696.00	5,750.00	5.5
50,000	DURHAM N C RFDG BOND DTD 2/1/92 BOOK ENTRY ONLY UT (CALL 2/1/2002 @ 102) 5.75% 02/01/2008-2002	50,000.00	51,651.00	2,875.00	5.6
100,000	GREENSBORO N C BD DTD 6/1/93 RFDG BOOK ENTRY ONLY UT (CALL 5/1/2003 @101) 5.1% 05/01/2005-2003	99,553.00	101,517.00	5,100.00	5.0
100,000	MECKLENBURG CNTY N C RFDG BD DTD 3/1/92 BOOK ENTRY ONLY UT N/C 5.4% 03/01/2000	100,303.00	100,223.00	5,400.00	5.4
100,000	NEW HANOVER CNTY NC HOSP REV BD DTD 2/15/99 OID NEW HANOVER REGL MED CTR PJ (C 10/1/2009 @ 101) 4.75% 10/01/2014-2009	99,235.00	87,335.00	4,750.00	5.4
100,000	NORTH CAROLINA ST BD DTD 3/1/97 SER A BEO (C 3/1/2007 @101) 5.2% 03/01/2009-2007	100,633.00	100,915.00	5,200.00	5.2
100,000	ORANGE CNTY N C BD DTD 6/1/93 RFDG BOOK ENTRY ONLY (CALL 6/1/2003 @100.050) 5.1% 06/01/2004-2003	100,000.00	101,547.00	5,100.00	5.0

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1019854809

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
DTD 12-5-51

		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
MUNICIPALS					
	TOTAL	794,992.50	796,539.50	42,675.00	5.4
COMMON STOCKS					
4,743	AMERICAN INTL GRP INC COM	23,414.73	512,836.88	948.60	0.2
3,600	DU PONT E I DE NEMOURS & CO COM	47,592.00	237,150.00	5,040.00	2.1
2,000	DUKE ENERGY CORP CO COM W/RIGHTS ATTACHED EXPIRING 12/16/2008	45,195.00	100,250.00	4,400.00	4.4
1,584	EXXON MOBIL CORP COM	46,323.74	127,611.00	2,787.84	2.2
2,400	FANNIE MAE COM	47,079.00	149,850.00	2,592.00	1.7
4,000	KELLOGG CO COM	22,401.50	123,250.00	3,920.00	3.2
6,000	PHILIP MORRIS COS INC COM	41,915.00	138,000.00	11,520.00	8.3
2,000	PITNEY-BOWES INC COM W/RTS ATTACHED EXP 02/20/2006	38,840.00	96,625.00	2,040.00	2.1
3,200	ROYAL DUTCH PETE CO NY REGISTRY SH PAR N GLDR 1.25	43,732.00	193,800.00	4,313.60	2.2
1,400	TEXACO INC COM W/RTS ATTACHED EXP 05/01/2004	39,963.00	76,037.50	2,520.00	3.3
	TOTAL	396,455.97	1,755,410.38	40,082.04	2.3
CONTRACTS, NOTES, MORTGAGES					
	PROMISSORY NOTE DTD 9/16/92 FM ROBERT C HAYES P&I DUE QTRLY BEG 12/15/92 SECD BY CONN MUTUAL LIFE INS CO POL #4,611,729 6.45% 09/15/2001	71,140.68	71,140.68	4,588.57	6.4
	TOTAL	71,140.68	71,140.68	4,588.57	6.4
PRINCIPAL ASSETS		1,354,445.80	2,714,947.21	91,984.37	3.4
PRINCIPAL CASH					
TOTAL		1,354,445.80	2,714,947.21		

SCHEDULE III, ATTACHMENT A

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1019854916

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
DTD 5-12-53

		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
TEMPORARY INVESTMENTS					
	EVERGREEN SELECT MUNICIPAL MONEY MARKET FUND CL I	73,274.90	73,274.90	3,700.38	5.0
	TOTAL	73,274.90	73,274.90	3,700.38	5.0
COMMON STOCKS					
10,000	AGRIBIOTECH INC NEW COM W/RIGHTS ATTACHED EXP 11/11/2009	107,031.25	23,750.00		
9,491	AMERICAN INTL GRP INC COM	46,854.14	1,026,214.38	1,898.20	0.2
5,240	ASSOCIATES FIRST CAP CORP CL A W/RTS ATTCHED EXP 4/13/2008	22,812.81	143,772.50	1,362.40	0.9
10,400	BRISTOL-MYERS SQUIBB CO COM	38,156.91	667,550.00	10,192.00	1.5
10,000	FORD MTR CO DEL COM	45,117.29	533,125.00	20,000.00	3.8
12,800	GENERAL ELEC CO COM	25,839.69	1,980,800.00	20,992.00	1.1
1,000	JEFFERSON-PILOT CORP COM W/RIGHTS ATTACHED EXP 2/8/2009	22,817.78	68,250.00	1,320.00	1.9
18,000	MCDONALDS CORP COM	66,350.00	725,625.00	3,510.00	0.5
16,200	MERCK & CO INC COM	38,395.60	1,088,437.50	18,792.00	1.7
3,000	NESTLE S A SPONSORED ADR REPSTG REG SH	93,750.00	273,345.00	3,168.00	1.2
38,400	PFIZER INC COM W/RTS ATTACHED EXP 10/15/2007	46,267.06	1,245,600.00	13,824.00	1.1
24,800	PHILIP MORRIS COS INC COM	83,975.00	552,000.00	46,080.00	8.3
16,000	PITNEY-BOWES INC COM W/RTS ATTACHED EXP 02/20/2006	65,200.00	773,000.00	16,320.00	2.1
9,600	ROYAL DUTCH PETE CO NY REGISTRY SH PAR N GLDR 1.25	117,458.00	581,400.00	12,940.80	2.2
13,600	SARA LEE CORP COM W/RTS ATTACHED EXP 05/31/2008	59,194.00	300,050.00	7,344.00	2.4
	TOTAL	879,219.53	9,982,919.38	177,743.40	1.8
CONTRACTS, NOTES, MORTGAGES					
	PROMISSORY NT DTD 10/9/96 FROM ROBERT C HAYES SECD BY LIFE INS MASS MUTUAL POL #200-70576880-RH 6% 10/09/1999	1,903,078.12	1,903,078.12	114,184.69	6.0
	TOTAL	1,903,078.12	1,903,078.12	114,184.69	6.0

SCHEDULE III, ATTACHMENT B

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1019854916

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
DTD 5-12-53

		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
REAL ESTATE					
1	CABIN ON 13,075+- ACRES, LAKE COUNTY, MINNESOTA	18,610.89	18,610.89		
1	40+- ACRES INCL 2 CABINS SE 1/4 OF SE 1/4, SECTION 7, TWP. 59 N., RANGE 10 WEST, LAKE CO., MN.	21,634.50	21,634.50	600.00	2.8
1	TIMBER LOCATED ON 13,075+- ACRES LAKE COUNTY MINNESOTA	304,445.37	736,703.47		
1	5 ACRES & HOUSE, 1975 HWY 73 EAST, CONCORD, NC CABARRUS CNTY (SFD-IP)	123,659.29	95,280.00	7,200.00	7.6
1	HOUSE & LOT, 49 BRAYS ISLAND, SHELDON, SC 29941	151,752.50	1,185,625.00	36,000.00	3.0
1	13,022.90 +/- ACRES TIMBERLAND LAKE COUNTY, MINNESOTA	372,726.53	768,500.00		
	TOTAL	992,829.08	2,826,353.86	43,800.00	1.5
LIABILITIES					
	LIAB:SPECIAL FACILITIES CHARGE AGREEMENT AND PROM NOTE RELATED TO THE SAND LAKE LINE-EXTENSION CONSTRUCTION LAKE CO MN	1.00-	1.00-		
	TOTAL	1.00-	1.00-		
PRINCIPAL ASSETS		3,848,400.63	14,785,625.26	339,428.47	2.3
PRINCIPAL CASH					
TOTAL		3,848,400 63	14,785,625.26		

SCHEDULE III, ATTACHMENT B

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1013731712

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
(322)

		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
TEMPORARY INVESTMENTS					
	EVERGREEN SELECT MUNICIPAL MONEY MARKET FUND CL I	71,061.74	71,061.74	3,588.62	5.1
	TOTAL	71,061.74	71,061.74	3,588.62	5.1
MUNICIPALS					
370,000	CARY N C WTR BD DTD 10/1/91 BK ENTRY ONLY UT BK QUALIFIED(CALL 4/1/2001 @ 102) 5.9% 04/01/2006-2001	360,746.30	383,841.70	21,830.00	5.7
300,000	CARY N C WTR BD DTD 10/1/91 BK ENTRY ONLY UT BK QUALIFIED(CALL 4/1/2001 @ 102) 6% 04/01/2007-2001	293,700.00	311,583.00	18,000.00	5.8
100,000	CARY N C SAN SWR BD DTD 4/1/96 BEO UT N/C 5.2% 04/01/2006	103,542.00	101,725.00	5,200.00	5.1
50,000	CATAWBA CNTY N C SCHOOL & COMMUNITY COLL BD DTD 6/1/94 BEO UT (C 6/1/2004 @ 100.5) 5.7% 06/01/2005-2004	52,788.50	51,978.50	2,850.00	5.5
300,000	CHARLOTTE NC BD DTD 8/1/98 OID PUB IMPT SER A (C 2/1/2008 @ 102) 4.75% 02/01/2013-2008	296,766.00	273,954.00	14,250.00	5.2
450,000	CHARLOTTE NC PUB IMPT BD DTD 8/1/91 BEO UT (P/R @ 102; O/M 2/1/2005) REFUNDED FROM AN ISSUE DTD 7/15/93 6.5% 02/01/2005-2001	463,848.00	469,336.50	29,250.00	6.2
300,000	CHARLOTTE NC PUB IMPT BD DTD 8/1/91 BEO UT (P/R @ 102; O/M 2/1/2006) REFUNDED FROM AN ISSUE DTD 7/15/93 6.5% 02/01/2006-2001	299,250.00	312,891.00	19,500.00	6.2
100,000	CHARLOTTE NC WTR & SWR BD DTD 6/1/92 BEO UT (P/R @ 102; O/M 6/1/2008) REFUNDED FROM AN ISSUE DTD 9/15/95 6.2% 06/01/2008-2002	109,156.00	105,377.00	6,200.00	5.9
100,000	CHARLOTTE NC RFDG BD DTD 8/15/92 BEO UT N/C 5.2% 07/01/2002	98,862.00	101,638.00	5,200.00	5.1
200,000	DURHAM & WAKE CNTYS N C SPL ARPT DIST RFDG BOND DTD 5/1/92 BOOK ENTRY ONLY UT N/C 5.75% 04/01/2000	209,280.00	200,848.00	11,500.00	5.7
400,000	DURHAM CNTY N C BD DTD 2/1/92 BEO UT (C 2/1/2002 @ 102) 5.75% 02/01/2006-2002	398,096.00	414,784.00	23,000.00	5.5

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1013731712

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
(322)

MUNICIPALS		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
200,000	DURHAM CNTY N C RFDG BOND DTD 9/1/92 BOOK ENTRY ONLY UT (CALL 3/1/2002 @ 101.5) 5.2% 03/01/2005-2002	201,050.00	204,094.00	10,400.00	5.1
100,000	DURHAM N C PUB IMPT BD DTD 2/1/92 BK ENTRY ONLY UT (CALL 2/1/2002 @ 101.5) 5.9% 02/01/2005-2002	99,750.00	103,617.00	5,900.00	5.7
235,000	DURHAM N C PUB IMPT BD DTD 2/1/92 BK ENTRY ONLY UT (CALL 2/1/2002 @ 102) 5.9% 02/01/2006-2002	232,201.15	244,566.85	13,865.00	5.7
100,000	GREENSBORO N C BD DTD 6/1/93 RFDG BOOK ENTRY ONLY UT (CALL 5/1/2003 @101) 5.1% 05/01/2005-2003	99,553.00	101,517.00	5,100.00	5.0
100,000	GUILFORD CNTY N C VAR PURP BD DTD 2/1/91 BEO REOF @99.121 TO YLD 6.3% UT (C 2/1/2001 @ 101.5) 6.2% 02/01/2004-2001	108,541.00	103,505.00	6,200.00	6.0
250,000	MECKLENBURG CNTY N C PUB IMPT BD DTD 4/1/94 BEO UT (C 4/1/2004 @ 101) 5.4% 04/01/2006-2004	251,882.50	256,302.50	13,500.00	5.3
40,000	MECKLENBURG CNTY N C BD DTD 4/1/90 BEO UT REFUNDED FROM AN ISSUE DTD 10/1/93 (O/M 4/1/2002; P/R @ 101) 6.75% 04/01/2000-2000	43,002.40	40,662.80	2,700.00	6.6
500,000	MECKLENBURG CNTY N C RFDG BD DTD 3/1/92 BOOK ENTRY ONLY UT N/C 5.4% 03/01/2000	504,649.00	501,115.00	27,000.00	5.4
50,000	NORTH CAROLINA ST BD DTD 1/1/97 BEO OID REOF @99.515 TO YLD 5.15% (C 6/1/2006 @ 102) 5.1% 06/01/2010-2006	49,632.00	49,782.00	2,550.00	5 1
50,000	NORTH CAROLINA ST BD DTD 3/1/97 SER A BEO (C 3/1/2007 @101) 5.2% 03/01/2009-2007	50,316.50	50,457.50	2,600.00	5.2
200,000	NORTH CAROLINA ST BD DTD 04/1/98 SER A BEO REOF @ 101.899 TO YLD 4.53% (C 04/1/2008 100) 4.75% 04/01/2009	203,528.00	192,418.00	9,500.00	4.9
600,000	NORTH CAROLINA ST CAP IMPT BD DTD 10/1/91 BEO REOF @98.829 TO YLD 5.75% N/C 5.6% 04/01/2002	591,774.00	614,184.00	33,600.00	5.5

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1013731712

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
(322)

MUNICIPALS		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
200,000	NORTH CAROLINA ST BD DTD 3/1/92 SER A PRISON & YOUTH SVCS FACS BEO (P/R @ 102; O/M 3/1/2006) REFUNDED FROM AN ISSUE DTD 10/15/93 6.2% 03/01/2002-2002	196,314.00	209,758.00	12,200.00	5.8
100,000	NORTH CAROLINA ST CLEAN WTR BD DTD 10/1/94 SER A BEO UT (C 6/1/2004 @ 101) 5.75% 06/01/2006-2004	97,800.00	104,710.00	5,750.00	5.5
300,000	ORANGE CNTY N C BD DTD 5/1/91 BK ENTRY ONLY;BK QUALIFIED(CALL 5/1/2001 @ 102) 6.4% 05/01/2008-2001	290,196.00	313,368.00	19,200.00	6.1
400,000	ORANGE CNTY N C BD DTD 6/1/93 RFDG BOOK ENTRY ONLY (CALL 6/1/2003 @100.050) 5.1% 06/01/2004-2003	402,216.00	406,188.00	20,400.00	5.0
100,000	RALEIGH N C SAN SWR BD DTD 5/1/93 BEO REOF @99.53 TO YLD 5.15% UT (C 5/1/2003 @ 101.5) 5.1% 05/01/2006-2003	102,999.00	101,359.00	5,100.00	5.0
300,000	RALEIGH N C BOND DTD 3/1/91 BK ENTRY ONLY (CALL 3/1/2001 @ 102) 6.4% 03/01/2005-2001	311,281.00	312,780.00	19,200.00	6.1
145,000	RALEIGH N C BOND DTD 3/1/91 BK ENTRY ONLY UT(CALL 3/1/2001 @ 102) 6.4% 03/01/2006-2001	142,768.45	151,177.00	9,280.00	6.1
125,000	RALEIGH N C BOND DTD 3/1/91 BK ENTRY ONLY;UT(CALL 3/1/2001 @ 102) 6.4% 03/01/2007-2001	119,123.75	130,348.75	8,000.00	6.1
125,000	RALEIGH N C BOND DTD 3/1/91 BK ENTRY ONLY UT(CALL 3/1/2001 @ 102) 6.5% 03/01/2009-2001	119,276.25	130,490.00	8,125.00	6.2
285,000	ROBESON CNTY N C RFDG BD DTD 3/1/94 AMBAC BEO UT N/C 4.5% 02/01/2000	288,716.40	285,102.60	12,825.00	4.5
100,000	WILMINGTON N C RFDG BD DTD 7/1/93 BEO UT (C 3/1/2003 @ 101.5) 4.8% 03/01/2006-2003	101,131.00	98,959.00	4,800.00	4.9
200,000	WINSTON-SALEM N C WTR & SWR SYS REV BD DTD 10/1/95 SER B 4.5% 06/01/2001	200,000.00	200,246.00	9,000.00	4.5
	TOTAL	7,493,736.20	7,634,664.70	423,575.00	5.5

SCHEDULE III, ATTACHMENT C

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1013731712

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
(322)

COMMON STOCKS		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
29,666	AMERICAN INTL GRP INC COM	457,076.15	3,207,636.25	5,933.20	0.2
11,924	ASSOCIATES FIRST CAP CORP CL A W/RTS ATTCHED EXP 4/13/2008	123,691.43	327,164.75	3,100.24	0.9
10,586	BP AMOCO P L C SPONSORED ADR	212,486.63	627,882.13	12,703.20	2.0
6,000	BANDAG INC CL A	285,596.80	127,500.00	7,080.00	5.6
16	BERKSHIRE HATHAWAY INC DEL CL A	454,857.14	897,600.00		
18	BERKSHIRE HATHAWAY INC DEL CL B	7,684.96	32,940.00		
36,000	BRISTOL-MYERS SQUIBB CO COM	716,625.00	2,310,750.00	35,280.00	1.5
6,000	BURLINGTON RES INC COM W/RIGHTS ATTACHED EXPIRING 12/16/2008	191,008.94	198,375.00	3,300.00	1.7
12,671	CT COMMUNICATIONS INC COM NEW	104,563.23	709,576.00	6,588 92	0.9
4,200	DU PONT E I DE NEMOURS & CO COM	80,325.00	276,675.00	5,880.00	2.1
5,850	DUKE ENERGY CORP CO COM W/RIGHTS ATTACHED EXPIRING 12/16/2008	170,381.25	293,231.25	12,870.00	4.4
4,172	EL PASO ENERGY CORP DEL COM	45,008.39	161,925.75	3,337.60	2.1
21,901	EXXON MOBIL CORP COM	597,465.34	1,764,399.31	38,545.76	2.2
69,256	FIRST CHARTER CORP COM	234,460.41	1,030,183.00	47,094.08	4.6
22,750	FORD MTR CO DEL COM	244,565.20	1,212,859.38	45,500.00	3.8
13,970	GTE CORP COM	445,293.75	985,758.13	26,263.60	2.7
40,000	GENERAL ELEC CO COM	721,250.00	6,190,000.00	65,600.00	1.1
14,000	INTL BUSINESS MACHINES CORP COM	396,375.00	1,510,250.00	6,720.00	0.4
18,000	MASCO CORP COM W/RIGHTS ATTACHED EXP 12/06/2005	209,250.00	454,750.00	8,640.00	1.9
22,500	MERCK & CO INC COM	407,812.50	1,511,718.75	26,100.00	1.7
8,000	MINNESOTA MNG & MFG CO COM	345,812.40	783,000.00	17,920.00	2.3
10,000	NESTLE S A SPONSORED ADR REPSTG REG SH	289,435.00	911,150.00	10,560.00	1 2
108,000	PFIZER INC COM W/RTS ATTACHED EXP 10/15/2007	255,375.00	3,503,250.00	38,880.00	1.1
36,000	PHILIP MORRIS COS INC COM	834,000.00	828,000.00	69,120.00	8 3
40,000	PITNEY-BOWES INC COM W/RTS ATTACHED EXP 02/20/2006	561,250.00	1,932,500.00	40,800.00	2.1
19,000	ROYAL DUTCH PETE CO NY REGISTRY SH PAR N GLDR 1.25	375,250.00	1,150,687.50	25,612.00	2.2
9,240	SONOCO PRODS CO COM	177,048.00	210,210.00	7,022.40	3.3
6,250	TEMPLE INLAND INC COM W/RIGHTS ATTACHED EXP 2/20/2009	228,906 25	412,109.38	8,000.00	1.9
7,500	UNION PAC CORP COM	184,699.87	327,656.25	6,000 00	1.8
6,352	UNION PACIFIC RES GRP COM	89,986.28	80,988.00	1,270.40	1.6
14,475	WISCONSIN ENERGY CORP COM	332,925.00	278,643.75	22,581.00	8.1

SCHEDULE III, ATTACHMENT C

FIRST UNION NATIONAL BANK

ACCOUNT NUMBER 1013731712

SCHEDULE OF PRINCIPAL ASSETS
AS OF DECEMBER 31, 1999

ROBERT CANNON HAYES
TRUST - CA CANNON
(322)

COMMON STOCKS		BOOK VALUE	MARKET VALUE	EST INCOME	YIELD
	TOTAL	9,780,464.92	34,251,369.58	608,302.40	1.8
PRINCIPAL ASSETS		17,345,262.86	41,957,096.02	1,035,466.02	2.5
PRINCIPAL CASH					
TOTAL		17,345,262.86	41,957,096.02		

SCHEDULE III, ATTACHMENT C

FORM A

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999 | For use by Members, officers, and employees

(3)

John David Hayworth, Jr.
(Full Name)
1023 Longworth H.O.B.
(Mailing Address)
Washington, D.C. 20515
Daytime Telephone (202) 225-2190

HAND DELIVERED
MC
RECEIVED
(Office Use Only)
00 MAY 15 PM 3:28

Filer Status	☒ Member of the U.S. House of Representatives	State AZ District 06	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☒
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John David H. Hayworth Jr.	5/14/00

2081

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	TEAM PAC	Spouse Salary	NA
	The Ciesla Foundation: "THE LIFE & TIMES OF Hank Greenberg"	VIDEOTAPE Royalty	$1,000

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Agua Caliente Tribe	Oct. 3-4	Phoenix - Palm Springs - Wash, DC	Y	Y	N	N

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2083

J. D. HAYWORTH
6TH DISTRICT ARIZONA
ASSISTANT MAJORITY WHIP

WASHINGTON OFFICE
1023 LONGWORTH BUILDING
WASHINGTON, DC 20515
(202) 225-2190

COMMITTEES
WAYS AND MEANS
SUBCOMMITTEES
SOCIAL SECURITY
OVERSIGHT

VETERANS' AFFAIRS
SUBCOMMITTEE
BENEFITS
VICE CHAIR

Congress of the United States
House of Representatives
Washington, DC 20515–0306

May 25, 2000

HAND DELIVERED

00 MAY 25 PM 4:10

The Honorable Jeff Trandahl
Clerk
U.S. House of Representatives
Washington, D.C. 20515

Dear Mr Trandahl

I am writing this to inform you that I mistakenly checked the yes box for question IV on my financial disclosure statement for calendar year 1999. I should have checked the no box, there were no transactions exceeding $1,000 during the reporting period

Thank you for your time in this matter

Best regards,

J. D. Hayworth
Member of Congress

JDH:te

FLAGSTAFF OFFICE
1300 S. MILTON STREET
SUITE 207
FLAGSTAFF, AZ 86001
(520) 556-8760

MESA OFFICE
1017 S. GILBERT ROAD
SUITE 203
MESA, AZ 85204
(480) 926-4151
1-800-874-0467

CASA GRANDE OFFICE
408 N. SACATON STREET
SUITE DD
CASA GRANDE, AZ 85222
(520) 876-4095

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 16 PM 3:24

Joel M. Hefley (Full Name)
Rm. 2230 RHOB
Wash. D.C. 20515 (Mailing Address)
(202) 225-4422 Daytime Telephone

(5)
HAND DELIVERY
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: Co. District: 5th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [✓]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [✓]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [✓]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [✓]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [✓]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [✓]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [✓]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [✓]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [✓]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [✓]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [✓]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joel M. Hefley	5/15/00

2085

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	SPOUSE:		
	Triple Diamond Limited (personally owned small bus.)	Bus. income	
	Co. state Legislature	salary	
	Stienmark	salary	

For payments to charity in lieu of honoraria, use Schedule II.

2086

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, or E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X								X										X									P
			Simon & Schuster		Indefinite																Royalties									X				
			1st Bank of Paducah, KY accounts					X									X									X								
JT	Parkmore Manor Apts. N. Hancock St. Co. sp., Co.						X									X										X								
JT	Friendship Pl. Apts. Friendship Pl., Co. sp. Co. (1/2)					X										X									X									
	Piper Jaffery & Hopwood Money Mkt. 25 N. Cascade Av. Co. sp., Co.					X											X							X										

For additional assets and unearned income, use next page.

2087

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joel M. Hefley

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	NOTE on Ok. FARM				X											X										X						
	M. Mae Buttler, Edmond, Ok																															
	Public Emp. Retirement Assn.				X																Will NOT Receive income until Retirement (See above)											
	Teachers Ins. Annuity Assn.								X																							
	Cong. Fed credit Union				X											X								X								

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2088

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Jim Burton	1/4 Mortgage on Paramore Apts. Hancock St. Co. Sp., Ga.		X								
JT	LOMAS CO. - DALLAS, TX.	1/2 Mortgage on Friendship Pl. Apts. Friendship Pl. Co. Sp., Co.		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Walter William Herger, Jr.
(Full Name)

2433 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone
202-225-3076

Filer Status	[X] Member of the U S House of Representatives	State CA District 02	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**		X
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Wally Herger	5-11-00

2090

Name Walter William Herger, Jr	Page of

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Fairfax County	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Walter William Herger, Jr	Page ___ of ___

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year For rental property or land, provide an address Provide full names of any mutual funds For a self-directed IRA (i e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year Exclude Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	if other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* SP Mega Corp. Stock JT 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
1120 4th Ave. (Rio Oso, CA)	$100,001 - $250,000	Rent	$15,001 - $50,000	NA
Herger Ranch (Rio Oso, CA)	$1,000,001 - $5,000,000	Rent	$15,001 - $50,000	NA
Herger Gas, Inc. (Rio Oso, CA)	$1,000,001 - $5,000,000	S-corp Allocation	$2,501 - $5,000	NA
Smith Barney, Inc.	$1,001 - $15,000	Interest	$1,001 - $2,500	NA
Nation's Bank (Springfield, VA)	$50,001 - $100,000	Interest	$5,001 - $15,000	NA

2092

Name Walter William Herger, Jr	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St. Dover, Del.	$100,001 - $250,000
	Home Savings of America - Marysville, CA	Personal Loan	$50,001 - $100,000

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Name Walter William Herger, Jr	Page of

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Bi-Partisan Congressional Retreat	March 19-21, 1999	WDC - Hershey (PA) - WDC	Y	Y	Y	NA

Name Walter William Herger, Jr	Page ____ of _____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Director (Uncompensated)	Herger Gas, Inc. (Propane Gas Distribution, Rio Oso, CA)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Walter William Herger, Jr.
(Full Name)

2433 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202-225-3076

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 02	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Wally Herger	5-17-00

2096

Name Walter William Herger, Jr | Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Bi-Partisan Congressional Retreat	March 19-21, 1999	WDC - Hershey (PA) - WDC	Y	Y	Y	NA
KARE Educational Woods Tour	6/18-6/21/00	WDC - McCloud, CA - WDC	Y	Y	N	NA

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Baron P. Hill
(Full Name)

1208 Longworth HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-5315

Filer Status	[X] Member of the U.S House of Representatives	State: IN District: 09	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]	
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]	
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Baron Hill	5-11-00

2098

Name Baron P. Hill	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Seymour Community Schools	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Baron P. Hill	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:*	SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Merrill Lynch Stock	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Merrill Lynch Growth	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Merrill Lynch Basic	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Merrill Lynch Capital	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Bonds in Public Employees Retirement Fund (PERF)	$15,001 - $50,000	Interest	$1,001 - $2,500	NA
SP	Teacher Retirement Fund	$15,001 - $50,000	NA	NA	NA

2100

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Rick Hill, M.C.
(Full Name)

1609 Longworth HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-3211

Filer Status	[X] Member of the U S House of Representatives	State: MT District: 00	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rick Hill	5/12/00

2101

Name Rick Hill, M C | Page 2 of 6

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP Mega Corp. Stock DC *Examples* SP 123 Main St., Dover, Del JT 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Fidelity Contra Fund	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	
Fidelity Low Price Stock Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
Nuveen Fund - NMO	$50,001 - $100,000	Interest	$5,001 - $15,000	
U.S. Treasury Bonds	$15,001 - $50,000	Interest	$2,501 - $5,000	
JT Composite Cash Mgmt. Acct	$100,001 - $250,000	Interest	$2,501 - $5,000	
F & G Life Annuity	$50,001 - $100,000	Interest	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Boeing Company	$1,001 - $15,000	Dividends	$201 - $1,000	
	GTE	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Aim Fund (formerly GT Global Fund)	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
	Sears Roebuck & Company	$1,001 - $15,000	Dividends	$1 - $200	
	Tyco International (formerly US Surgical)	$15,001 - $50,000	Dividends	$1 - $200	
	Baker Fentress & Company	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
JT	Pacific American Shares	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
JT	Lot 28-Cloverview Sub-Apts	$500,001 - $1,000,000	Rent	$2,501 - 5,000 Net $50,001 - $100,000 Gross	
	Unit 2C-Arcade Bldg-Helena	$100,001 - $250,000	Rent	$1,001 - 2,500 00 Net $15,001 - $50,000 Gross	
	Unit 2B-Arcade Bldg-Helena	$50,001 - $100,000	Rent	$1,001 - 2500 00 Net $5,001 - $15,000 Gross	
	Unit 3D-Arcade Bldg-Helena	$15,001 - $50,000	Rent	$1,001 - 2500 00 Net $5,001 - $15,000 Gross	
	Lower Level Partnership	$100,001 - $250,000	Rent	$5,001 - $15,000	
	InsureWest, Inc	$50,001 - $100,000	Dividends	$~~2,501~~ 1,000 - $5,000	
JT	Red Letter Mining Claim	$50,001 - $100,000	None	None	
JT	Financial Corp of Santa Barbara	None	None	None	
SP	Carnival Cruise Lines	$1,001 - $15,000	Dividends	$1 - $200	
	Oppenheimer QSC	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	Peco Energy	$1,001 - $15,000	Dividends	$1 - $200	
	Congressional Fed. Credit Union	$100,001 - $250,000	Interest	$1,001 - $2,500	

2108

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

NW Bank (accounts)	$1 - $1,000	Interest	$1 - $200	
Condominium, Palm Desert, CA	$100,001 - $250,000	Rent	$5,001 - $15,000	P

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Helena Financial Services (Helena, MT)	Mortgage-Suite 2C-Arcade	$10,001 - $15,000
	SBA (Denver, CO)	Mortgage-Suite2B-Arcade	$0 - $5,000.00 ~~$10,001 - $15,000~~
	Glacier Bank (Kalispell ,MT)	Mortgage-12th Tee Apts	$250,001 - $500,000
	InsureWest, Inc. (Helena ,MT)	Loan - Personal	$15,001 - $50,000

2105

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
President	InsureWest, Inc.
Partner	12th Tee Apts.
Partner	Lower Level Partnership
Proprietor	Hill Properties

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Rick Hill, M.C.
(Full Name)

1609 Longworth HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-3211

Filer Status	[X] Member of the U S House of Representatives	State: MT District: 00	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? — Yes [ ] No [X]
If yes, complete and attach Schedule I.

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? — Yes [ ] No [X]
If yes, complete and attach Schedule II.

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? — Yes [X] No [ ]
If yes, complete and attach Schedule III.

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? — Yes [ ] No [X]
If yes, complete and attach Schedule IV.

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? — Yes [X] No [ ]
If yes, complete and attach Schedule V.

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? — Yes [ ] No [X]
If yes, complete and attach Schedule VI.

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? — Yes [ ] No [X]
If yes, complete and attach Schedule VII.

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? — Yes [X] No [ ]
If yes, complete and attach Schedule VIII.

IX Did you have any reportable agreement or arrangement with an outside entity? — Yes [ ] No [X]
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rick Hill	5/23/00

2107

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
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SP DC, *Examples* JT	SP Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Fidelity Contra Fund	$15,001 - $50,000	Capital Gains and Dividends	$5,001 - $15,000	
	Fidelity Low Price Stock Fund	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	
	Nuveen Fund - NMO	$50,001 - $100,000	Interest	$5,001 - $15,000	
	U.S. Treasury Bonds	$15,001 - $50,000	Interest	$2,501 - $5,000	
JT	Composite Cash Mgmt. Acct	$100,001 - $250,000	Interest	$2,501 - $5,000	
	F & G Life Annuity	$50,001 - $100,000	Interest	$1,001 - $2,500	

2108

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Boeing Company	$1,001 - $15,000	Dividends	$201 - $1,000	
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	Tyco International (formerly US Surgical)	$15,001 - $50,000	Dividends	$1 - $200	
	Baker Fentress & Company	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
JT	Pacific American Shares	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	
JT	Lot 28-Cloverview Sub-Apts. (12th Tee Apts.)	$500,001 - $1,000,000	Rent	$2501 - 5,000 Net $50,001 - $100,000 Gross	
	Unit 2C-Arcade Bldg-Helena	$100,001 - $250,000	Rent	$1,001 - 2500 Net $15,001 - $50,000 Gross	
	Unit 2B-Arcade Bldg-Helena	$50,001 - $100,000	Rent	$1,001 - 2500 Net $5,001 - $15,000 Gross	
	Unit 3D-Arcade Bldg-Helena	$15,001 - $50,000	Rent	$1,001 - 2500. Net $5,001 - $15,000 Gross	
	Lower Level Partnership	$100,001 - $250,000	Rent	$5,001 - $15,000	
	InsureWest, Inc	$50,001 - $100,000	Dividends	$1,000 ~~$2,501~~ - $5,000	
JT	Red Letter Mining Claim	$50,001 - $100,000	None	None	
JT	Financial Corp. of Santa Barbara	None	None	None	
SP	Carnival Cruise Lines	$1,001 - $15,000	Dividends	$1 - $200	
	Oppenheimer QSC	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	Peco Energy	$1,001 - $15,000	Dividends	$1 - $200	
	Congressional Fed. Credit Union	$100,001 - $250,000	Interest	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

NW Bank (accounts)	$1 - $1,000	Interest	$1 - $200	
Condominium, Palm Desert, CA	$100,001 - $250,000	Rent	$5,001 - $15,000	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

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SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Helena Financial Services (Helena, MT)	Mortgage-Suite 2C-Arcade	$10,001 - $15,000
	SBA (Denver, CO)	Mortgage-Suite2B-Arcade	~~$10,001~~ 0 – $5,000 - $15,000
	Glacier Bank (Kalispell ,MT)	Mortgage-12th Tee Apts.	$250,001 - $500,000
	InsureWest, Inc. (Helena ,MT)	Loan - Personal	$15,001 - $50,000
	Washington Mutual	Mortgage-Palm Desert Condominium	$15,001 - $50,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
President	InsureWest, Inc.
Partner	12th Tee Apts
Partner	Lower Level Partnership
Proprietor	Hill Properties

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

EARL FREDERICK HILLIARD
(Full Name)

1314 Longworth House Office Building
(Mailing Address)
Washington DC 20515

Daytime Telephone:
(202) 225-2665

Filer Status	[X] Member of the U.S. House of Representatives	State: AL District: 07	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**		X
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Earl F. Hilliard	6-14-2000

2113

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	University of Alabama, Birmingham	Spouse Consulting Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name EARL FREDERICK HILLIARD | Page 3 of 7

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	Alabama A&M University	Speech	May 15, 1999	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
	SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
	1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
	American Trust Corp. (30.5% interest by virtue of Hilliards & Company owning 100% of ATC)	$50,001 - $100,000	NA	None	

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	National Bank of Commerce	Business Loan	$100,001 - $250,000
	Federal Retirement Thrift Investment Board	Business Loan	$10,001 - $15,000
	Paul Pizza, Port Orange, FL	Business Mortgage on 1306 Pennsylvania Ave., S.E., Washington, DC	$100,001 - $250,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash. D.C.-Chicago-Wash. D.C.	N	N	N	N
Mega Corporation	Aug 8-13	Wash. D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Steel Valley Authority and the Solidarity Fund	Jan. 5, 1999	DC-Quebec & Montreal, Canada-DC	N	Y	N	N
Christopher Reynolds Foundation, Area Foundation, & General Service Foundation	Feb 17-22, 1999	Birmingham, AL-Cuba-Birmingham, AL	Y	Y	N	N
The Faith & Politics Institute	Mar 5-7, 1999	DC-Birmingham-Montgomery-Selma, AL-DC	Y	Y	N	N
Gethsemane Baptist Church	Oct 22-23, 1999	Birmingham, AL-Buffalo, NY-Birmingham, AL	Y	N	N	N
Catholic Relief Services	Dec 15-20, 1999	Birmingham, AL-Banjul, The Gambia-Birmingham, AL	Y	Y	N	N

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Chairman of the Board	Hilliards and Company, Inc.
Chairman of the Board	American Trust Communication Corporation
Chairman of the Board	American Trust Corporation
Director	African American United Fund, Inc.
Director	World Center for Democracy, Inc.
Director	The Elected and Appointed Officials Educational and Legal Defense Fund, Inc.
Trustee	The Emma L. Bower Foundation for Minority Interest in Media, Inc.
Vice President	Birmingham Morehouse College Alumni Club, Inc.
Trustee	Tuskegee University
Trustee	Miles College Law School
Trustee	Selma University
Director	Birmingham Greater Golf Associates, Inc.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
ARCHIVE RESOURCE CENTER
00 MAY 11 PM 1:24
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(4)

MC HAND DELIVERED
(Office Use Only)

MAURICE D. HINCHEY
(Full Name)

2431 RAYBURN BLDG.
(Mailing Address)

WASHINGTON DC 20515
Daytime Telephone: 202-225-6335

Filer Status	[X] Member of the U.S. House of Representatives	State: NY District: 26	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $280 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Maurice D. Hinchey	5/5/00

2120

Name MAURICE D. HINCHEY

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	STATE OF NEW YORK	STATE PENSION	$32,734.00

For payments to charity in lieu of honoraria, use Schedule II.

Name MAURICE D. HINCHEY | Page 3 of 4

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investment(s), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	ALFACELL COMMON STOCK		$1.001 - $15.000	Capital Gains and Dividends	None	
	PRUDENTIAL IRA VARIABLE INVESTMENT		$15.001 - $50.000	Capital Gains and Dividends	None	

Name MAURICE D. HINCHEY

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
INTERNATIONAL MANAGEMENT AND DEVELOPMENT INSTITUTE	01/14-01/17	DC-BERLIN-DC	Y	Y	N	NONE
NATIONAL ITALIAN-AMERICAN FOUNDATION	03/30-04/05	DC-ROME-DC	Y	Y	N	NONE
ALASKA RAINFOREST CAMPAIGN	05/27-06/01	DC-JUNEAU-DC	Y	Y	N	NONE
WILDERNESS SOCIETY	09/24-09/25	DC-ST HUBERTS, NY-DC	Y	Y	N	NONE

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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HOUSE OF REPRESENTATIVES

(9)

MC MAY 15 2000
(Office Use Only)

RUBEN E. HINOJOSA
(Full Name)

P.O. BOX 1075
(Mailing Address)

(202) 225-2531
Daytime Telephone

MERCEDES, TX 78570

Filer Status	[X] Member of the U.S. House of Representatives — State: TEXAS District: 15TH	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	✓ Ruben E. Hinojosa	May 15, 2000 ✓

2124

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	H & H FOODS, INC.	CONSULTING FEES	10,000
	FIRM CONSULTANTS, INC.	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name RUBEN E. HINOJOSA | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	COUNCIL FOR OPPORTUNITY IN EDUCATION	SPEECH	JUNE 14, 1999	2,000

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock	X	X	X	P
	DC Simon & Schuster	Indefinite	Royalties	X	
	JT 1st Bank of Paducah, KY accounts	X	X	X	
	342 S. TEXAS AVE./MERCEDES, TX RUBEN'S RENTAL BUILDING	X	X	X	
	REAL ESTATE ASSOCIATES	X	PARTNERSHIP INCOME	X	
* SP	MORALES-BEST HINOJOSA ARCHITECTS, INC.	X	S CORPORATION INCOME	X	
	HINOJOSA ENTERPRISES	X	PARTNERSHIP INCOME	X	
	HINOJOSA DEVELOPMENT	X	PARTNERSHIP INCOME	X	
SP	FIRM CONSULTANTS, INC.	X	S CORPORATION INCOME	X	

For additional assets and unearned income, use next page.

* N [illegible]

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name RUBEN E. HINOJOSA

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	H & H FOODS ESOP	F	DIVIDENDS	I None	
	H & H FOODS STOCK	I	DIVIDENDS	I None	
DC	MERRILL LYNCH CMA	C	DIVIDENDS	II $1 – $200	
DC	TEXAS REGIONAL BANCSHARES	E	DIVIDENDS; CAPITAL GAINS	IV $1,001 – $2,500	
SP	MERRILL LYNCH (IRA) - CASH	C	DIVIDENDS	II $1 – $200	
SP	INTL BANCSHARES STOCK	C	DIVIDENDS	II $1 – $200	
SP	LUCENT TECHNOLOGIES STOCK	C	DIVIDENDS	II $1 – $200	
SP	MCI WORLDCOM STOCK	C	DIVIDENDS	I None	
SP	MICROSOFT CORP. STOCK	D	DIVIDENDS	I None	
DC	TEXAS TOMORROW FUND	C	INTEREST	I None	
	DAIN RAUSCHER (IRA)				
	MFS TOTAL RETURN FUND-A	D	DIVIDENDS; CAPITAL GAINS	IV $1,001 – $2,500	
	MASSACHUSETTS INVESTORS	D	DIVIDENDS; CAPITAL GAINS	IV $1,001 – $2,500	
	MFS GOV'T SECURITIES FUND	D	DIVIDENDS	III $201 – $1,000	
JT	BANK OF AMERICA CHECKING (DC)	B	INTEREST (N/A)	I None	
	MERRILL LYNCH CMA	E	DIVIDENDS	VI $5,001 – $15,000	
	E-COURT STOCK	D	DIVIDENDS	I None	

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Name RUBEN E. HINOJOSA | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
DC	TEXAS REGIONAL BANCSHARES		X		5-6-99 and 6-2-99	X									
DC	TEXAS TOMORROW FUND	X			VARIOUS	X									
	E-COURT STOCK	X			12-28-99		X								
	DAIN RAUSCHER (IRA)														
	MFS TOTAL RETURN FUND-A	X			Monthly Dividend Reinvestment	X									
	MASSACHUSETTS INVESTORS	X			Purchase (4-7-99) and dividend reinvestment	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	H & H FOODS	LOAN TAXES PERSONAL (1990-1997)			X							
	HINOJOSA DEVELOPMENT CO.	PERSONAL LOAN 1984				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
PARTNER	HINOJOSA DEVELOPMENT COMPANY
PARTNER	HINOJOSA ENTERPRISES
PARTNER	REAL ESTATE ASSOCIATES LIMITED II

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

David L. Hobson
(Full Name)

482 Longford Close, East
(Mailing Address)

Springfield OH 45503

Daytime Telephone: 202-225-4324

Filer Status	[X] Member of the U.S. House of Representatives	State: OH District: 07	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule I**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [X]	No [ ]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David L. Hobson	5-11-00

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Name David L. Hobson

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Public Employee Retirement System of Ohio	Legislative Pension	$10,529.00

For payments to charity in lieu of honoraria, use Schedule II.

Name David L. Hobson

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$ 500
	N/A			

Name David L. Hobson | Page 4 of 20

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for Income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
I-Four Partnership (Bldg. & Land) 2138 N. Limestone, Springfield, OH	$1,000,001 - $5,000,000	Rent	$2,501 - $5,000	
Cablevision of Baton Rouge Partnership Englewood, CO	None	Interest	$1 - $200	
Retirement Resources, Inc. (S-Corp.) Springfield, OH	None	No Activity	None	S Corp Liquidated
Fujiyama Columbus Partnership Note Receivable	$250,001 - $500,000	Interest	$15,001 - $50,000	
Fujiyama Indianapolis Partnership Note Rec.	$100,001 - $250,000	Interest	$15,001 - $50,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Delaware Group (Mutual Fund)	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Kemper Technology Fund (Mutual Fund)	$15,001 - $50,000	Dividends	$2,501 - $5,000	
	Cooker Restaurant Corp (Stock)	$250,001 - $500,000	Dividends	$2,501 - $5,000	
SP	Proctor & Gamble (Stock)	$15,001 - $50,000	Dividends	$201 - $1,000	Partial transfer into Salomon Smith Barney # 715-01917-11
	Proctor & Gamble (Stock)	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Security BancCorp (Stock)	$250,001 - $500,000	Dividends	$2,501 - $5,000	
SP	Security BancCorp (Stock)	None	Dividends	$2,501 - $5,000	Transfered into Salomon Smith Barney # 715-01917-11
	Champaign Telephone Company (Stock)	None	Dividends	$1,001 - $2,500	Transfered to Salomon SMith Barney 715-51764-10
	Assets Held in American Express Acct#7927473	None	None	None	
	Mutual Funds	$1,001 - $15,000	Dividends	$201 - $1,000	P AND S
	IBM, Corp (Stock)	$1,001 - $15,000	Dividends	$1 - $200	
	FLC (Stock) Formerly Newco FLC Stock	$100,001 - $250,000	Dividends	None	
	International Basic Resources (Stock)	$1,001 - $15,000	Dividends	None	
	Fidelity Investment Advisors, Inc. (Stock)	$1,000,001 - $5,000,000	Dividends	None	
	Ohio Public Employee Retirement Fund	$15,001 - $50,000	Pension	$5,001 - $15,000	
	G. Arthur Seelbinder (Note Receivable)	$100,001 - $250,000	Interest	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Assets Held in Security National Bank (Grantor Trust)	None	None	None	
Money Market Funds	$1,001 - $15,000	Dividends	$1 - $200	P
Security BancCorp (Stock)	$100,001 - $250,000	Dividends	$201 - $1,000	
Assets Held In SalomonSmith Barney Acct#715-51764-10	None	None	None	
Citigroup Inc. (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
Intel Corp. (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
Nokia Sponsored ADR (Stock)	$50,001 - $100,000	Dividends	$201 - $1,000	P
Security BancCorp (Stock)	$15,001 - $50,000	Dividends	$201 - $1,000	
Smith Barney Money Funds	None	Dividends	$1 - $200	S
Western Ohio Financial Corp (Stock)	$1,001 - $15,000	Capital Gains and Dividends	$2,501 - $5,000	S
Cisco Systems, Inc (Stock)	$50,001 - $100,000	Dividends	$1 - $200	
Champaign Telephone Co. (Stock)	$15,001 - $50,000	Dividends	$2,501 - $5,000	Transfered to Salomon Smith Barney 715-51764-10
Chevron Corp. (Stock)	$1,001 - $15,000	Dividends	$1 - $200	Transfered into Account
Cooker Restaurant Corp. (Stock)	$50,001 - $100,000	Dividends	$201 - $1,000	Transfered into Account
Doubleclick Inc. (Stock)	$1,001 - $15,000	Dividends	$201 - $1,000	P
IBM Corp (Stock)	$1,001 - $15,000	Dividends	$1 - $200	Transfered into Account
Proctor & Gamble (Stock)	$50,001 - $100,000	Dividends	$201 - $1,000	Transfered into Account

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Arlington Bank (Stock)	$15,001 - $50,000	Dividends	None	P
Assets Held in Salomon Smith Barney # 715-45624-12	None	None	None	
Perpetual Federal Savings Bank (Stock)	None	Capital Loss	None	S
Security BancCorp (Stock)	None	Capital Loss	None	S
Smith Barney Money Funds	$1,001 - $15,000	Dividends	$201 - $1,000	P AND S
Barnes & Noble Inc. (Stock)	None	Capital Loss	None	S
Bristol Myers Squibb (Stock)	$15,001 - $50,000	Dividends	$201 - $1,000	
Coca-Cola Co. (Stock)	None	Capital Loss	$201 - $1,000	S
Lucent Technologies (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
Microsoft Corp (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
Washington Mutual, Inc. (Stock)	None	Capital Loss	$201 - $1,000	S
Charter One (Stock)	None	Capital Loss & Dividends	None	S
Dell Computer Corp (Stock)	$15,001 - $50,000	Dividends	$1 - $200	P
Doubleclick Inc. (Stock)	$15,001 - $50,000	Dividends	$1 - $200	P
MCI Worldcom, Inc. (Stock)	$15,001 - $50,000	Dividends	$1 - $200	P
Nokia Corp (Stock)	$15,001 - $50,000	Dividends	$1 - $200	P
Intel Corp (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
Assets Held In IRA Advest Acct#782-70032	None	None	None	
Cooker Restaurant Corp (stock)	None	Dividends	$1 - $200	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Microsoft Corp (stock)	$15,001 - $50,000	Dividends	$1 - $200	P
	Security BancCorp (Stock)	$50,001 - $100,000	Dividends	$201 - $1,000	
	Money Funds	$1 - $1,000	Dividends	$1 - $200	P AND S
	Qualcomm, Inc. (Stock)	$1,001 - $15,000	Dividends	None	P
	Assets Held In Smith Barney IRA Acct#715-50987-13	None	None	None	
	Select 10 Unit Trust	$1,001 - $15,000	Dividends	$1 - $200	P
	SB Money Funds	$1 - $1,000	Dividends	$1 - $200	P AND S
	Mutual Funds	$1,001 - $15,000	Dividends	$1 - $200	
	Chevron Corp (Stock)	None	Dividends	None	Transfered into Salomon Smith Barney # 715-51764-10
SP	Assets Held in Salomon Smith Barney IRA Acct#715-57493-15	None	None	None	
	Select 10 Unit Trusts	$1,001 - $15,000	Dividends	$201 - $1,000	P
	SB Money Funds	$1 - $1,000	Dividends	$1 - $200	P
	Mutual Funds	$1,001 - $15,000	Dividends	$1 - $200	P
	Assets Held In American Express Acct#12506655	None	None	None	
	American Express (Stock)	$1,001 - $15,000	Dividends	$1 - $200	
	Colgate Palmolive (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
	Proctor & Gamble (Stock)	$1,001 - $15,000	Dividends	$1 - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	CitiGroup (Stock)	$15,001 - $50,000	Dividends	$1 - $200	
	Microsoft Corp (Stock)	$15,001 - $50,000	Dividends	None	
	Iomega Corp (Stock)	None	Capital Loss	None	S
	Huntington Bancshares Inc (Stock)	$1 - $1,000	Capital Gains and Dividends	$201 - $1,000	P AND S
	IBM Corp (Stock)	$1,001 - $15,000	Dividends	$1 - $200	P
	Assets in Salomon Smith Barney # 715-06351-13	None	None	None	
	CMGI Inc. (Stock)	$1,001 - $15,000	Dividends	None	P
	Doubleclick Inc (Stock)	$1,001 - $15,000	Dividends	None	P
	Exxon Mobil Corp (Stock)	$15,001 - $50,000	Dividends	None	Inherited
	General Electric Co. (Stock)	$15,001 - $50,000	Dividends	None	P
	IBM Corp (Stock)	$1,001 - $15,000	Dividends	None	P
	Oracle Corp (Stock)	$1,001 - $15,000	Dividends	None	P
	Proctor & Gamble (Stock)	$500,001 - $1,000,000	Dividends	None	Inherited or Transfered into Account
	Qualcomm Inc (Stock)	$15,001 - $50,000	Dividends	None	P
	Yahoo, Inc. (Stock)	$1,001 - $15,000	Dividends	None	P
	Broadwing, Inc. (Stock)	None	Capital Gains	$5,001 - $15,000	Inherited & Sold
	Convergys Corp (Stock)	None	Capital Gains	$5,001 - $15,000	Inherited & Sold
SP	Assets Held in Salomon Smith Barney #715-01917-11	None	None	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Proctor & Gamble (Stock)	$15,001 - $50,000	Dividends	$1 - $200	Transfered into account
Security Banc Corp (Stock)	$100,001 - $250,000	Dividends	$1,001 - $2,500	Transfered into Account
Mutual Funds	$1,001 - $15,000	Dividends	$201 - $1,000	P
Unit Investment Trusts	$1,001 - $15,000	Dividends	$1 - $200	P

Name David L. Hobson | Page 11 of 20

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Assets in American Express # 792-7473	Purchase	Various	$1,001 - $15,000
	Mutual Funds	Purchase	Various	$1,001 - $15,000
	Mutual Funds	Sold	Various	$1,001 - $15,000
	Assets in American Express # 12506655	Purchase	Various	$1,001 - $15,000
	IBM Inc. (Stock)	Purchase	10/28/99	$1,001 - $15,000
	MCI Worldcom, Inc. (Stock)	Sold	10/28/99	$1,001 - $15,000
	Huntington Bancshares Inc (Stock)	Sold	07/15/99	$1,001 - $15,000
	MCI Worldcom, Inc. (Stock)	Purchase	07/15/99	$1,001 - $15,000
	Huntington Bancshares Inc (Stock)	Purchase	04/05/99	$1,001 - $15,000
	Iomega Corp (Stock)	Sold	04/05/99	$1,001 - $15,000
	Assets Held in Smith & Barney Acct#715-45624-12	Exchange	000000	Over $50,000,000
	Nokia Corp (Stock)	Purchase	01/08/99	$1,001 - $15,000
	MCI Worldcom (Stock)	Purchase	Various	$15,001 - $50,000
	Dell Computer Corp (Stock)	Purchase	09/07/99	$15,001 - $50,000
	Doubleclick Inc. (Stock)	Purchase	11/17/99	$15,001 - $50,000
	SB Money Funds	Purchase	Various	$1,001 - $15,000

Name David L. Hobson

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	SB Money Funds	Sold	Various	$1,001 - $15,000
	Barnes & Noble Inc. (Stock)	Sold	02/11/99	$1,001 - $15,000
	Charter One Finl., Inc (Stock)	Sold	08/10/99	$1,001 - $15,000
	Coca-Cola Co (Stock)	Sold	08/10/99	$1,001 - $15,000
	Perpetual Fed Svgs. Bank Urbana, OH (Stock)	Sold	02/11/99	$1,001 - $15,000
	Radio Unica Communication Corp (Stock)	Purchase	10/18/99	$1,001 - $15,000
	Radio Unica Communication Corp (Stock)	Sold	11/29/99	$1,001 - $15,000
	Security BancCorp (Stock)	Sold	Various	$15,001 - $50,000
	Washington Mutual Inc. (Stock)	Sold	08/10/99	$1,001 - $15,000
	Assets held in Smith Barney Acct#715-51764-10	Exchange	000000	Over $50,000,000
	Blockbuster Inc. (Stock)	Purchase	8/1/99	$1,001 - $15,000
	Yahoo Inc. (Stock)	Purchase	4/8/99	$15,001 - $50,000
	Nokia Corp (Stock)	Purchase	11/29/99	$1,001 - $15,000
	Doubleclick Inc. (Stock)	Purchase	11/29/99	$1,001 - $15,000
	Arlington Bank (Stock)	Purchase	03/01/99	$15,001 - $50,000
	Yahoo Inc (Stock)	Sold	5/18/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	SB Money Funds	Sold	Various	$1,001 - $15,000
	Blockbuster Inc (Stock)	Sold	08/30/99	$1,001 - $15,000
	Western Ohio Financial Corp. (Stock)	Sold	04/08/99	$15,001 - $50,000
	Western Ohio Financial Group (Stock)	Sold	04/27/99	$1,001 - $15,000
	Western Ohio Financial Corp. (Stock)	Sold	04/27/99	$1,001 - $15,000
	Assets held in Smith Barney Acct #715-06351-13	Purchase	00000	$1,001 - $15,000
	Newell Rubbermaid, Inc (Stock)	Purchase	12/20/99	$50,001 - $100,000
	Broadwing, Inc (Stock)	Purchase	12/20/99	$1,001 - $15,000
	Broadwing, Inc (Stock)	Sold	12/22/99	$15,001 - $50,000
	Convergys Corp (Stock)	Purchase	12/20/99	$1,001 - $15,000
	Convergys Corp (Stock)	Sold	12/22/99	$15,001 - $50,000
	Kroger Co (Stock)	Purchase	12/22/99	$1,001 - $15,000
	Kroger Co (Stock)	Sold	12/22/99	$1,001 - $15,000
	Newell Rubbermaid Inc (Stock)	Sold	12/22/99	$50,001 - $100,000
	Yahoo Inc (Stock)	Purchase	12/22/99	$1,001 - $15,000
	Qualcomm Inc (Stock)	Purchase	12/22/99	$1,001 - $15,000

Name David L. Hobson

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Oracle Corp (Stock)	Purchase	12/22/99	$1,001 - $15,000
	IBM Corp (Stock)	Purchase	12/22/99	$1,001 - $15,000
	General Electric Co (Stock)	Purchase	12/22/99	$15,001 - $50,000
	Doubleclick Inc (Stock)	Purchase	12/22/99	$1,001 - $15,000
	CMGI Inc (Stock)	Purchase	12/22/99	$1,001 - $15,000
SP	Assets Held in Salomon Smith Barney IRA # 715-57493-15	Purchase	000000	$1,001 - $15,000
	Select 10 Unit Trusts	Purchase	Various	$1,001 - $15,000
	SB Money Funds	Purchase	Various	$1,001 - $15,000
	Mutual Funds	Purchase	Various	$1,001 - $15,000
SP	Assets Held in Salomon Smith Barney # 715-01917-11	Purchase	000000	$1,001 - $15,000
	Mutual Funds	Purchase	03/30/99	$1,001 - $15,000
	Unit Investment Trusts	Purchase	03/30/99	$1,001 - $15,000
	Assets Held in Security National Bank Grantor Trust	Purchase	000000	$1,001 - $15,000
	Money Market Funds	Purchase	Various	$1,001 - $15,000
	Assets Held in IRA Advest # 782-70032	Purchase	000000	$1,001 - $15,000
	Cooker Restaurant Corp (Stock)	Sold	09/30/99	$1,001 - $15,000

Name David L. Hobson

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Microsoft Corp (Stock)	Purchase	Various	$1,001 - $15,000
	Money Funds	Purchase	Various	$1,001 - $15,000
	Money Funds	Sold	Various	$1,001 - $15,000
	Assets Held in Salomon Smith Barney IRA # 715-50987-13	Purchase	000000	$1,001 - $15,000
	Select 10 Unit Trust	Purchase	Various	$1,001 - $15,000
	SB Money Funds	Sold	Various	$1,001 - $15,000
	SB Money Funds	Purchase	Various	$1,001 - $15,000

Name David L. Hobson

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Key Bank (Paid off 1999)	Note Secured by Stock	$50,001 - $100,000
	Key Bank (Paid off 1999)	Revolving Line of Credit	$50,001 - $100,000
	Bank One	Loan Secured by Stock	$100,001 - $250,000
	Key Bank	Fujiyama Columbus OH Partnership Restaurant & Land	$250,001 - $500,000
	Security National Bank	First Mortgage on 2138 N. Limestone Street	$500,001 - $1,000,000
	Huntington National Bank	Mortgage on Parcels #22033440032 & #22033440020, Rt 68, Spfld, OH(Fidelity Investment Advisors, Inc.)	$50,001 - $100,000
	Huntington National bank	Revolving Line of Credit	$100,001 - $250,000
	Heller Small Business Lending Corp Indianapolis, IN	Mortgage on Fujiyama Restaurant, Indianapolis, IN	$100,001 - $250,000
	Security National Bank	Business Note	$15,001 - $50,000
	Provident Bank	Business Note, Turnberry Village Development, 1525 Turnberry Village Dr, Dayton, OH	$500,001 - $1,000,000
	Ohio Bank	Land Loan, Edinburgh Village Development, Parcel #067-038-11-0006, St Rt 48, Dayton, OH	$250,001 - $500,000
	Salomon Smith Barney	Note Secured by Stock	$100,001 - $250,000
	New Carlisle Federal	Revolving Line of Credit	$50,001 - $100,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
N/A		

Name David L. Hobson

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Ripon Educational Fund	Aug. 12-21	Washington D.C. - Oslo, Norway - Stockholm, Sweden - Washington D.C.	Y	Y	Y	3 Days
American Crop Protection Assn.	Sept. 24-27	Washington D.C. - White Sulphur Springs, WVA - Washington D.C.	Y	Y	Y	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Trustee (Term ended in 1999)	Ohio Wesleyan University
Director (Resigned 1999)	Cooker Restaurant Corporation
Partner	I-FOUR
Partner	Cablevision of Baton Rouge, Ltd.
Officer	Fidelity Investment Advisors, Inc.

03/11/00 18:52 CONG DAVE HOBSON +++ CONG. HOBSON 021

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1982-Present	State of Ohio Public Employee Retirement System	Continuing Participation in Retirement Plan

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
... CENTER
00 MAY 12 AM 11:31
... REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

JOSEPH M. HOEFFEL
(Full Name)
1908 LYCOMING AVE
(Mailing Address)
ABINGTON PA 19001
Daytime Telephone 610-272-8400

Filer Status	[X] Member of the U.S. House of Representatives	State PA District 13	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joseph M Hoeffel	5/11/00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	MURPHY, OLIVER, CAIOLA + GOWEN	DEFERRED COMPENSATION	$20,500
	SCHOOL DISTRICT OF PHILADELPHIA	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
THE CONNELL COMPANY, WESTFIELD NJ	SPEECH	JULY 23, 1999	$ 2,000

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Name JOSEPH M HOEFFEL | Page 4 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp Stock					X								X										X								P
DC	Examples: Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
	NORTHEAST UTILITIES STOCK		X											X								X										
	VANGUARD INDEX 500 STOCK			X										X								X										
	VANGUARD WINDSOR II IRA				X									NA							NA											
	VANGUARD WELLESLEY IRA				X									NA							NA											
	AETNA VARIABLE FUND DEFERRED COMP				X									NA							NA											
	EQUITABLE IRA			X										NA							NA											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOSEPH M HOEFFEL

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	SCHOOL DISTRICT OF PHILA PENSION				X									NA							NA											
	VANGUARD ASSET ALLOCATION IRA				X									NA							NA											

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Name JOSEPH M HOEFFEL | Page 6 of 8

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	VANGUARD 500 INDEX FUND	X	X		VARIOUS		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	AFSA, MILWAUKEE, WI	EDUCATION LOAN		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	ALASKA WILDERNESS LEAGUE SIERRA CLUB, WILDERNESS SOCIETY	JULY 6-11	WASH, D.C.-FAIRBANKS-WASH, D.C.	Y	Y	Y	N
	AMERICAN ISRAEL EDUCATION FOUNDATION	AUG 25-SEP 2	PHILADELPHIA - TEL AVIV PHILADELPHIA	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

(5)
RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 17 AM 8:49
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC INSIDE MAIL

(Full Name) Peter Hoekstra

(Mailing Address) 1124 Longworth HOB, Washington DC 20515

Daytime Telephone 202-225-4401

Filer Status	[X] Member of the U.S. House of Representatives	State MICHIGAN District 2ND	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Peter Hoekstra	5/15/2000

Name Peter Hoekstra | Page 2 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP	Mega Corp. Stock					X								X										X								P
		Simon & Schuster			Indefinite																Royalties												
		1st Bank of Paducah, KY accounts						X									X									X							
	Personal Acct:																																
	Old Kent Bank, Holland				X																												
	Huntington Bank, Holland				X																												
	Macatawa Bank, Holland				X																												
	Herman Miller Inc-Stock					X																											
	Federal Thrift Savings							X																									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Peter Hoekstra

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Huntington Bank Trust						X							X		X	X				N.A.											S
	1498 South Shore Drive						X										X															S
	IRA Acct. - Old Kent Bank, Holland																															
	· Genlex Stock					X											X															
	· Herman Miller Stock				X									X			X					X										
	· Huntington Bankshares Stock			X										X			X						X									
	Hilliard Lyons/Personal IRA																															
	· Hilliard Lyons, Gov't Fund						X							X			X															
	· Compaq Computer Corp.			X										X			X															
	· Union Planters Corp.			X										X			X															
	· Growth Fund Amer. Inc.				X									X			X															
	· New Economy Fund GBI				X									X			X															
	· Wash. Mutual Inv. Fund Inc					X								X			X															
	· Bear Stearns FDS				X									X			X															
	· FT Tech Growth				X									X			X															
	· Genlex Corp				X									X			X															
	· Schwab Corp.				X									X			X															
	Capitol World Growth			X										X			X															

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Name Peter Hoekstra

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Huntington Bank - IRA		X		2-18-99				X						
	Hilliard Lyons Gov't Fund	X			2-19-99				X						
	Compaq Computer	X			2-23-99	X									
	Union Planters Corp.	X			2-23-99	X									
	Growth Fund Amer. Inc.	X			2-24-99		X								
	New Economy Fund	X			2-24-99		X								
	Wash. Mutl. Inv. Fd. Inc.	X			2-24-99			X							
	Hilliard Lyons Gov't Fund		X		2-26-99				X						
	Bear Stearns FDS	X			4-28-99		X								
	Hilliard Lyons Gov't Fund		X		5-03-99		X								
	FT Tech Growth Fund	X			5-17-99		X								
	Hilliard Lyons Gov't Fund		X		5-20-99		X								
	Gentex Corp.	X			12-16-99		X								
	Hilliard Lyons Gov't Fund		X		12-21-99		X								
	1498 South Shore Dr.		X		4-30-99				X						
	Charles Schwab Corp.	X			6-15-99		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Huntington Equity Credit	Equity Line-Holland, MI		X								
	Macatawa Bank	Demand Loan				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

PETE HOEKSTRA
SECOND DISTRICT
MICHIGAN
E-MAIL:
tellhoek@mail.house.gov
WORLD WIDE WEB:
www.house.gov/hoekstra/

106th Congress
Congress of the United States
House of Representatives

COMMITTEES
EDUCATION AND THE WORKFORCE
COMMITTEE
CHAIRMAN, OVERSIGHT AND
INVESTIGATIONS SUBCOMMITTEE
BUDGET COMMITTEE

HAND DELIVERED

00 JUN -8 AM 11:29

MC

(6)

June 8, 2000

Mr. Jeff Trandahl, Clerk
Legislative Resource Center
B-106 Cannon House Office Building
Washington, D.C. 20515

Dear Mr. Trandahl:

I am including a revised copy of my Financial Disclosure Statement for 1999 for your records. I have amended "Schedule III - Assets and "Unearned" Income" (pages 2-3) and would like for these pages to be substituted for what is currently on record.

Thank you. Please contact me if you have questions or need additional information.

Sincerely,

Pete Hoekstra

Pete Hoekstra
Member of Congress

PH/kas

WASHINGTON OFFICE
1124 Longworth HOB
Washington, DC 20515
(202) 225-4401
FAX: (202) 226-0779

DISTRICT OFFICE – HOLLAND
31 East 8th St., Suite 320
Holland, Mich. 49423
(616) 395-0030
FAX: (616) 395-0271

DISTRICT OFFICE – MUSKEGON
900 3rd Street, Suite 203
Muskegon, Mich. 49440
(616) 722-6386
FAX: (616) 722-0176

DISTRICT OFFICE – CADILLAC
210-1/2 North Mitchell St.
Cadillac, Mich. 49601
(616) 775-0050
FAX: (616) 775-0298

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED CENTER
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CLERK
HAND DELIVERED
(Office Use Only)

Peter Hoekstra
(Full Name)

1124 Longworth HOB, Washington DC 20515
(Mailing Address)

Daytime Telephone: 202-225-4401

Filer Status	[X] Member of the U.S. House of Representatives	State: MICHIGAN District: 2ND	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Peter Hoekstra	5/15/2000

Name Peter Hoekstra | Page 2 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction P, S, E
SP	*Examples:* Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties								X				
JT	1st Bank of Paducah, KY accounts						X									X										X						
	Personal Acct:																															
	Old Kent Bank, Holland			X												X						X										
	Huntington Bank, Holland			X												X						X										
	Macatawa Bank, Holland			X												X						X										
	Herman Miller Inc-Stock				X									X									X									
	Federal Thrift Savings						X							X		X	X										X					

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Peter Hoekstra

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Huntington Bank Trust						X							X		X	X					N.A.										S
	1498 South Shore Drive						X										X															S
	IRA Acct.-Old Kent Bank,																															
	Holland																															
	· Gentex Stock					X											X															
	· Herman Miller Stock				X									X			X						X									
	· Huntington Bankshares Stock			X										X			X							X								
	Hilliard Lyons/Personal IRA																															
	· Hilliard Lyons Govt Fund						X							X			X						X									
	· Compaq Computer Corp.			X										X			X						X									
	· Union Planters Corp.			X										X			X							X								
	· Growth Fund Amer. Inc				X									X			X						X									
	· New Economy Fund GBI				X									X			X							X								
	· Wach. Mutual Inv. Fund Inc					X								X			X								X							
	· Bear Stearns FDS				X									X			X					X										
	· FT Tech Growth				X									X			X						X									
	· Genkx Corp				X									X			X					X										
	· Schwab Corp.				X									X			X						X									
	Capitol World Growth			X										X			X															

This page may be copied if more space is required.

Name Peter Hoekstra

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Huntington Bank-IRA		X		2-18-99				X						
	Hilliard Lyons Gov't Fund	X			2-19-99				X						
	Compaq Computer	X			2-23-99	X									
	Union Planters Corp.	X			2-23-99	X									
	Growth Fund Amer. Inc.	X			2-24-99		X								
	New Economy Fund	X			2-24-99		X								
	Wash. Mutl. Inv. Fd. Inc.	X			2-24-99			X							
	Hilliard Lyons Gov't Fund		X		2-26-99				X						
	Bear Stearns FDS	X			4-28-99		X								
	Hilliard Lyons Gov't Fund		X		5-03-99		X								
	FT Tech Growth Fund	X			5-17-99		X								
	Hilliard Lyons Gov't Fund		X		5-20-99		X								
	Gentex Corp.	X			12-16-99		X								
	Hilliard Lyons Gov't Fund		X		12-21-99		X								
	1498 South Shore Dr.		X		4-30-99				X						
	Charles Schwab Corp.	X			6-15-99		X								

This page may be copied if more space is required.

Name Peter Hoekstra

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Huntington Equity Credit	Equity Line-Holland, MI		X								
	Macatawa Bank	Demand Loan				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

2171

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Hon. Tim Holden
(Full Name)

31 Pearl Street
St. Clair PA 17970
(Mailing Address)

Daytime Telephone: 202-225-5546

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 06	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Tim Holden	5/15/00

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Name Hon. Tim Holden	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	County of Schuylkill, Pennsylvania	spouse salary	$31,807.10

For payments to charity in lieu of honoraria, use Schedule II.

Name Hon. Tim Holden	Page __ __ of ___

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT Schuylkill Federal Employees Credit Union, 724 Market Street, Pottsville, PA 17901	$1,001 - $15,000	Dividends	$201 - $1,000	NA
JT Community Bank, 2nd and Canal Street, St. Clair, Pennsylvania 17970	$1 - $1,000	Interest	$1 - $200	NA
JT Pennsylvania National Bank, One South Centre, Pottsville, PA 17901	$1 - $1,000	Interest	$1 - $200	NA
JT Industrial Holdings., Inc.	$1 - $1,000	Dividends	$1 - $200	NA
JT Specialized Portfolio -- Energy portfolio	$1,001 - $15,000	Interest	$201 - $1,000	NA

Name Hon. Tim Holden | Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	* Windsor II Stocks	$15,001 - $50,000	Dividends	$2,501 - $5,000	NA
JT	* PA Tax Free Fund, Insured Long Term Bond	$1,001 - $15,000	tax exempt income	$201 - $1,000	NA
JT	* VMMR Prime Portfolio -- money market	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT	* VanGuard High Yield Corporate Bond Portfolio	$15,001 - $50,000	Interest	$2,501 - $5,000	NA
	Schuylkill County Employees Retirement System	None	Interest	$201 - $1,000	NA
	** Main Street Bancorp. Inc.	$1,001 - $15,000	Dividends	$1 - $200	P
	** Sovereign Bancorp. Inc.	$1,001 - $15,000	Dividends	$1 - $200	P
	** UIT First Trust	$1,001 - $15,000	Dividends	$1 - $200	P
	** Legg Mason Money Market Funds	$15,001 - $50,000	Dividends	$1 - $200	P
	** Legg Mason Focus TR, Inc.	$1,001 - $15,000	Dividends	None	P
	** Legg Mason Value Trust	$1,001 - $15,000	Dividends	None	P
SP	Schuylkill County Employees Retirement System	$15,001 - $50,000	N/A	N/A	NA

* Portfolio list
** IRA Rollover

Name Hon. Tim Holden	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Legg Mason Focus TR, Inc.	Purchase	8/3/99;9/2/99;10/4/99;11/2/99;12/2/99	$1,001 - $15,000
	Legg Mason Value Trust	Purchase	8/3/99;9/2/99;10/4/99;11/2/99;12/2/99	$1,001 - $15,000
	Sovereign Bancorp. Inc.	Purchase	9/2/99	$1,001 - $15,000
	UIT First Trust	Purchase	12/31/99	$1,001 - $15,000
	Main Street Bancorp. Inc	Purchase	9/2/99	$1,001 - $15,000
	Legg Mason Money Market Fund	Purchase	7/14/99	$15,001 - $50,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
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HOUSE OF REPRESENTATIVES

(9)
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Rush D. Holt
(Full Name)
PO Box 782 Pennington, NJ 08534 (609) 737-2343
(Mailing Address) Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives — State: NJ District: 12	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rush Holt	May 15, 2000

Name	Page 2 of 9
Rush Holt	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Princeton Medical Center	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	Princeton Univ.	Speech	4/5/99	$750.00
	Connell Co.	Speech	2/25/99	$2000
	Sigma Xi, the Research Society	Speech	11/5/99	$2000

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Name Rush Holt | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	First Union Bank Checking Cap. Acct.			X												X								X								
JT	~~Albank~~ Charter One			X												X						X										
JT	Summit Bank			X												X						X										
JT	Rental House 273 A Penn-Rdg Rd Pennington NJ						X								X										X							
JT	Cang'l Fed. Credit Union		X													X						X										
	Summer House Old Huntington Rd. Ausable Forks NY						X								X										X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Rush Holt

Page 5 of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Vanguard Windsor - retirement					X								X			X								X			X				
	TIAA/CREF						X							X			X										X					
	Froelich Farm Land Trust				X										X									X								
SP	Fidelity ~~IRA~~ 403(b)					X								X			X								X							
SP	Fidelity Investmark ~~403(b)~~ IRA				X									X			X							X								
SP	TIAA/CREF							X						X			X										X					
SP	Prudential 403(b)			X										X			X							X								
SP	Share of farm, Lancefield Rd. Amity, OR						X									X										X						

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Name Rush Holt

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								

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Name Rush Holt | Page 7 of __

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NA											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NA		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	American Physical Society	March 21, 1999	Phila. – Atl. – Phila	N	Y	N	N
	Sigma Xi, The Research Society	Nov. 9	DC – Mpls – DC	N	N	N	N
	New York Stock Exchange	Jan 24, 2000	NJ – NYC – DC	N	Y	N	N
	New Jersey AFL-CIO	Jan 12-13	Newport News – Atl City – Newark	Y	Y	N	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Bd of Trustees	Family and Childrens Services of Central NJ
Bd of Trustees	Planned Parenthood of Mercer Area

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(7)

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Darlene Hooley
(Full Name)

6404 Failing Street
(Mailing Address)

West Linn OR 97068

Daytime Telephone: 202-225-5711

Filer Status	[ ] Member of the U.S House of Representatives	State: OR District 05	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics In Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Darlene Hooley

DATE (Month/Day/Year): 5/15/00

2186

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Oregon	Retirement	$30,106.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed* provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account and provide its value at the end of the reporting year **Exclude:** Your personal residence(s) (unless there rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Fidelity Investment	$15,001 - $50,000	Dividends and Interest	$1,001 - $2,500	
	Portland Teachers Credit Union	$1 - $1,000	Interest	$1 - $200	
	AETNA	$100,001 - $250,000	Tax Deferred Annuity	None	
	Westport Oil	$1,001 - $15,000	Royalty	$1,001 - $2,500	
	Jackson National	None	Tax Deferred Annuity	NA	E
	Standard	None	Tax Deferred Annuity	None	E

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	US Bank Trust	$1,001 - $15,000	Interest	$1 - $200	
	PERS	None	NA	None	
	Wright Patman Federal Credit Union	$1 - $1,000	Interest	$1 - $200	
	Sutro & Co. Inc: C/F IRA Rollover	$50,001 - $100,000	Interest/Dividends	$1,001 - $2,500	P
	Sutro Savings Account	$1,001 - $15,000	Interest	$1 - $200	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1998	$15,001 - $50,000
	Standard	Exchange	6/14/99	$15,001 - $50,000
	Jackson National	Exchange	6/15/99	$15,001 - $50,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* only if the balance at the end of the reporting period exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	VISA	Charge Account	$10,001 - $15,000
	Portland Teachers Credit Union	Home Improvement Loan	$15,001 - $50,000

Name Darlene Hooley | Page 7 of 7

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.8-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The American Israel Education Foundation	11/27/99-12/5/99	PDX-Ben Gurion -DCA	Y	Y	N	0

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 12 AM 9:45
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(3)
HAND DELIVERED
MC
(Office Use Only)

STEPHEN HORN
(Full Name)

3944 Pine Avenue
(Mailing Address)

Daytime Telephone:
Long Beach California 90807 (202)225-6676

Filer Status	[x] Member of the U.S. House of Representatives	State: CA District: 38	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [x]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [x]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [x]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [x]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [x]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Stephen Horn	May 12, 2000

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Name STEPHEN HORN	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of California (Public Employees Retirement System)	pension	$51,893.32 (gross)

For payments to charity in lieu of honoraria, use Schedule II.

Name STEPHEN HORN

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	Salomon Smith Barney IRA			X												X					NA											
SP	Salomon Smith Barney IRA			X												X					NA											
	Shurgard IRA			X												X					NA											
SP	Shurgard IRA			X												X					NA											
JT	Boston Financial			X												X					NA											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name STEPHEN HORN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	TIAA CREF-Annuity							x								x					NA											
	TIAA-Cref IRA					x										x					NA											
	Beneficial Standard (now Conseco Life)	x	(rolled over into SunAmerica, F&G)																													E
	SunAmerica Life Insurance Annuity					x										x					NA											
	General American Life Insurance Annuity					x										x					NA											
	Safeco Life Insurance Annuity						x									x					NA					x						
	Fidelity & Guaranty Life Ins. Annuity						x									x					NA											
JT	Bank of America savings			x												x						x										
	Bank of America CD	x																					x									
SP	Vanguard Money Market			x										x									x									

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Kutak Foundation, Omaha, Nebraska (uncompensated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

RESOURCE CENTER
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OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(4)

MC HAND DELIVERED

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

John Nathan Hostettler
(Full Name)

1507 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202)225-4636

Filer Status	[ ] Member of the U.S. House of Representatives	State: IN District: 08	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[ ]	[X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	[ ]	[X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[X]	[ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	[ ]	[X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

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SIGNATURE OF REPORTING INDIVIDUAL John N. Hostettler

DATE (Month/Day/Year) 5/15/2000

2198

Name John Nathan Hostettler | Page 2 of 4

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed* provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account and provide its value at the end of the reporting year. **Exclude:** Your personal residence(s) (unless there . rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP. Mega Corp. Stock SP. 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Boeing Co. Stock	$1 - $1,000	Dividends	$1 - $200	
Edison International Stock	$1,001 - $15,000	Dividends	$1 - $200	
Exxon Corp. Stock	$1,001 - $15,000	Dividends	$1 - $200	
General Electric Company Stock	$1,001 - $15,000	Dividends	$1 - $200	
RJR Nabisco Stock	$1 - $1,000	Dividends	$1 - $200	
Fortune Brands Stock	$1 - $1,000	Dividends	$1 - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Gallaher Group Stock	$1 - $1,000	Dividends	$1 - $200	
	Bristol Meyers Squibb Stock	$1 - $1,000	Dividends	$1 - $200	
	IBM Stock	$1 - $1,000	Dividends	$1 - $200	
	Key Corp Stock	$1 - $1,000	Dividends	$1 - $200	

Name John Nathan Hostettler	Page 4 of 4

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Evansville Teachers Federal Credit Union	Visa Credit Card	$10,001 - $15,000
	Bank One First USA Bank	MasterCard Credit Card	$10,001 - $15,000
	Citibank	MasterCard Credit Card	$10,001 - $15,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

Amory Houghton, Jr.
(Full Name)

80 East Market Street, Suite 300 (202) 225-3161
(Mailing Address) Daytime Telephone

Corning, New York 14830

Filer Status	[x] Member of the U.S. House of Representatives	State: New York District: 31st	[ ] Officer or Employee — Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [x]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [x]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [x]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [x]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [x]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/15/00

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UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT – 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE I - EARNED INCOME

Source and Type	Amount
Corning Incorporated:	
Income (in-kind):	
Value of secretarial services provided by former employer for whom consulting services are provided without monetary compensation (income in-kind, in excess of the 1999 outside earned income limit of $20,505, is offset by 1999 donations to qualified charitable organizations in the amount of $100,658)	$ 83,000
Trustee and Executor Commissions (commissions represent personal services provided to protect family resources, amounts not subject to outside earned income limit):	
L.H. Beer Trust 12/10/34	13,600
J.R. Houghton Trust 12/10/34	12,800
A.B. Houghton Trust 12/10/34	8,400
A. Houghton Jr. Trust 12/10/34	10,200
E.H. Weinberg Trust 12/10/34	9,700
A.S. Lassalle Trust 1/20/79	1,900
G.H. Lassalle Trust 11/21/78	3,800
H.D. Houghton Trust 12/22/61	10,900
M.T. Mowbray Trust U/W G.B. Hollister	4,100
H.M. Carter Trust U/W G.B. Hollister	4,000
M.T. Mowbray Trust 4/18/46	700
B.H. Brakenridge Trust 4/18/46	700
B. Hollister Jr. Trust 4/18/46	700
P.H. Mowbray Trust U/W H.C. Hollister	2,600
B. Hollister Trust U/W H.C. Hollister	2,600
P.J. Allatt Jr. Trust 8/15/49	3,900
J.W. Hollister Trust U/W G.B. Hollister	2,700
B.H. Brakenridge Trust U/W G.B. Hollister	2,900
B. Hollister Jr. Trust U/W G.B. Hollister	2,800
H.M. Carter Trust 4/18/46	700
B.G. Ooten Trust 4/21/65	2,200
M.A. Keaton Trust 1/22/64	2,000
M.A. Keaton Trust 6/24/63	1,600
E.M. OeDell Trust 6/24/63	1,500
E. Houghton Trust 12/10/34	15,200
E.A. Ray Trust 12/10/34	12,100
E.H. Cole Trust 12/10/34	14,800
	$ 149,100

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Debt Securities:					
Augusta National Inc. - building certificate - Series B	B		None	None	

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Equity Securities:					
Citigroup, Inc. – common stock (formerly Citicorp, N.A.)	F		Dividend	IV	
Corning Incorporated - common stock	J		Dividend	VIII	Gift
Genentech Corporation - common stock (sold in 1999)	A		Capital Gain	VIII	S
Gemstar International Group Ltd.	E		Capital Gain	IX	S
Market Street Trust Company - common stock, Corning, NY	C		Dividend	V	E
Market Street Partners LLC, Corning NY	F		Interest	I	E
Procter & Gamble - common stock	E		Dividend	III	
NovaCare - common stock	B		None	None	
Sun Microsystems - common stock	G		None	None	
U.S. Government Obligations:					
Savings bonds series E & EE	C		Interest	III	
Other:					
J.P. Morgan Delaware, Wilmington, DE	F		Interest	VI	
Chase Manhattan Bank, N.A., Corning, NY	D		Interest	III	
Citibank, N.A., New York, NY	E		Interest	III	
Corning Federal Credit Union, Corning, NY	C		Interest	II	
BankBoston, N.A., Quincy, MA	B		Interest	II	
76-78 East Market Street (investment property), Corning, NY	H		Rent	VII	
Congressional Federal Credit Union, Washington, DC	D		Interest	III	
Hingham Institution for Savings, Hingham, MA	C		Interest	II	
M&T Bank, Corning, NY	E		None		
Notes receivable - RGD Consulting Group, Elmira, NY	C		Interest	I	
Notes receivable - Nancy M. MacCraig, Corning, NY	C		Interest	I	
Notes receivable – Moisie River Fishing Camp	D		Interest	I	
Harbor International Fund, equity mutual fund, Toledo, OH	C		Dividend	II	P
Longleaf Partners Fund, mutual fund, Kansas City, MO	D		Dividend	III	P
Vanguard Index Trust, mutual fund, Philadelphia, PA	C		Dividend	II	P
Dividend receivable, Harbor International, mutual fund	B				
Dividend receivable, Vanguard Extended Market Portfolio, mutual fund	B				
Dividend receivable, Longleaf Partners Fund, mutual fund	B				

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Partnerships:					
Corning Associates II, managed by Aicre Realty, rental of office building, 41 State Street, Albany, NY (share - 50.00/5.50%)	F	(1)	Partnership	I	
Acorn IV, a general partnership which is the sole limited partner in Whitehall LTD, a partnership holding a real estate investment in vacant land within Walnut Creek Industrial Park, Austin, TX (share - 20.00/19.60%**)	F	(2)	Partnership	I	
Bradford Gordon 1990-3, limited partnership organized to acquire royalty, mineral or other nonoperating interests in natural gas properites primarily in Michigan (share - 3.17%)	C	(2)	Partnership	III	
Mutual Benefit Theatre Partners, L.P.III, a partnership formed to finance the live stage threatrical production and presentation of musical and dramatic plays selected and produced by The Really Useful Threatre Co., Inc., Newark, NJ (share - .70%)	D	(2)	Partnership	III	
Corning Associates VC-1, investment in venture capital partnerships (share 19.61/ - %**):					
Business Development Capital Limited Partnership III, managed by the Foster Management Co., King of Prussia, PA, invested in Sonus Corp. (formerly Health Care Capital) and Monarch Dental Corporation. (This partnership was liquidated at the end of 1999)	A	(2)	Partnership	I	
Intersouth Partners Limited Partnership, managed by Intersouth Associates, Research Triangle Park, NC, invested in IllumElex Corp.; no items were disposed of during the year ended December 31, 1999. (share - -/.78%)	C	(2)	Partnership	I	

** Represents ownership % in both investment partnership/ownership in ultimate partnership, respectively.

(1) Valuation method – original investment, plus/less any additional capital contributed/withdrawn since inception.

(2) Valuation method – original investment, plus/less any additional capital contributed/withdrawn and income/loss since inception.

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Partnerships (continued)					
Bradford Gordon 1992-2, limited partnership organized to acquire royalty, mineral or other non-operating interests in natural gas properties primarily in Michigan (share - 6.81%)	C	(2)	Partnership	II	
Bradford Gordon 1996-1, limited partnership organized to acquire royalty, minerals or other non-operating interests in natural gas properties primarily in Michigan (share - 4.76%)	C	(2)	Partnership	III	
Trusts:					
Market Street Equity Trust II (MSETII) - Delaware business trust - investments include: common stock of Intel Corp., CVS Corp., GAP, Inc., Merck and Co., Inc., ServiceMaster Co., Dell Computer Corp., Gateway, Inc., Rentokil Group plc, Gillette Co., Automatic Data Processing Inc., Pfizer Inc., Stryker Corp., Johnson & Johnson, Autozone Inc., McDonalds Corp., Procter & Gamble Co., General Electric Co., Dollar General Corp. and Pierpont Money Market Fund (share - .20%)	F	(3)	Trust	VII	S
MSETII holdings disposed of or exchanged during the year ended December 31, 1999 – Microsoft Corp., Coca Cola Co., Cisco Systems Inc., IMS Health Inc., Eli Lilly & Co., and Walgreen Co.					
Amory Houghton Jr. Trust U/W A.B. Houghton - (interest in income only)			Trust	I	
Holdings consist of:					
Trusts:					
Market Street Fixed Income Trust I - Delaware business trust - investments include: securities of Power Authority of the State of New York, City of Pawtucket - Rhode Island, Clark County School District of Nevada, Cook County Community College - Illinois, Metropolitan Pier and Exposition Authority - Illinois, Rhode Island Depositors Economic Protection					

(2) See explanation at page 3 of 24.
(3) Valuation method – partner's share of market value of investments at December 31, 1999.

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Corp., Fulton County School District - Georgia, District of Columbia General Obligation, City of Chicago - Illinois, Massachusetts Bay Transportation Authority – Massachusetts, Chicago O'Hare International Airport – Illinois, City of Austin – Texas, Regional Transportation Authority – Illinois, Florida State Board of Education, New York State Dormitory Authority, City of Dallas - Texas, Texas Public Finance Authority, Orlando Utilities Commission – Florida, State of Mississippi, State of Hawaii, Dallas Fort Worth Regional Airport – Texas, New York State Local Government Assistance Corp., Connecticut Health and Educational Facilities Authority, Jacksonville Electric Authority – Florida, Michigan State Hospital Finance Authority, Los Angeles County Public Works Finance Authority, State of Wisconsin, Alpine School District – Utah, Jersey City Municipal Utilities Authority – New Jersey, Washington Public Power Supply System, Conroe Industrial Development Corp., District of Columbia – Howard University, Commonwealth of Pennsylvania General Obligation, Prince Georges County Hospital - Maryland, State of New Jersey, Sacramento Municipal Utility District – California, State of Colorado, North Central Texas Health Facilities Development Corp., Nebraska Public Power District, Geisinger Authority – Pennsylvania, Colorado Housing Finance Authority, Commonwealth of Massachusetts, Massachusetts Water Resources Authority, Santa Clara Valley Water District - California, New York State Medical Care Facilities Finance Agency, City of Miami - Florida, Salt River Project Agricultural Improvement					

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued): and Power District – Arizona, King County School District No. 414, Minnesota Housing Finance Agency, Traverse City Area Public Schools - Michigan, City of Los Angeles - California, Grant County Public School District Number 002 - Washington, Sacramento County - California, City and County of San Francisco – California, City of Boston – Massachusetts, City of Jacksonville - Florida, Michigan Housing Development Authority - Rental, Virginia Housing Development Authority - Multifamily, Virginia Housing Development Authority – Commonwealth, Illinois Housing Development Authority - Multifamily, Illinois Health Facilities Authority, City of Berwyn – Illinois, Platte River Authority - Colorado, Middletown Township - New Jersey, King County - Washington, Multnomah County School District No. 15 – Oregon, Lago Vista Independent School District - Texas, Waxahachie Independent School District - Texas, Colorado Housing Finance Authority - Multi-family, Yuma Industrial Development Authority – Arizona, Palm Beach County Solid Waste Authority, Spring Branch Independent School District – Texas, Municipal Assistant Corp. - New York, City of Fort Worth - Texas, Tennessee Housing Development Agency, Town of Nantucket – Massachusetts, State of North Carolina, Austin Independent School District – Texas, City of Long Beach Harbor – California, Texas Health Facilities Development Corp., Hyland Hills Metropolitan Park and Recreational District – Colorado, Brownsville Independent School District – Texas, St. Louis County – Missouri, Donna Independent School District – Texas, City of Hampton –					

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Virginia, Jefferson County – Kentucky, New Jersey Health Care Facilities, District of Columbia, Michigan Municipal Bond Authority, Belmont County – Ohio, Sierra View Local Healthcare District – California, New York State Urban Development Corp., Anne Arundel County – Maryland, West Windsor Plansboro Regional School District – New Jersey, State of Wisconsin, Purdue University – Indiana, Federal Home Loan Bank, State of Texas, State of Nevada Colorado River Commission, Clear Creek Independent School District – Texas, Lamar Consolidated Independent School District – Texas, Harris County – Texas, Arapahoe County School District – Colorado, Arlington Independent School District – Texas, City of Kansas City – Missouri, California Housing Finance Agency, Colorado Water Resource and Power Development Authority, LaPorte Independent School District – Texas, Plugerville Independent School District – Texas, State of Washington, City of Portland – Oregon, Wayne County – Michigan, City of Illinois – Illinois, Wyandotte County – Kansas, Kane County School District Number 101 – Illinois, Michigan State Housing Development Authority, Charleston County – South Carolina, City of Jackson – Mississippi, Sanger Union School District – California, State of New York, South Carolina Transportation Infrastructure Bank, Bishop International Airport Authority –Michigan, Michigan Municipal Bond Authority, Illinois Health Facilities Authority, Medical University of South Carolina, Fairfax County Economic Development Authority – Virginia, State of Illinois State Scholarship Commission, Pennsylvania Higher					

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Education Assistance Agency,University of Pennsylvania Series C, Wisconsin Health & Educational Authority, Arlington County – Virginia, State of Maryland, City of Pearland – Texas, New York State Dormitory Authority, Chicago Public Building Commerce – Illinois, City of Dallas – Texas, Utah State Building Ownership Authority, Michigan Building Authority, Dallas County Flood Control District – Texas, JP Morgan Institutional Tax Exempt Money Market Fund, and Pierpont Money Market Fund (share - .50%)	H	(3)			
MSFIT I holdings disposed of during the year ended December 31, 1999 Maricopa County School District No. 4 of Arizona, Pennsylvania Higher Education, Dallas County Flood Control District No. 1 - Texas, State of Utah, St. Mary's Hospital, State of Nevada, North Carolina Health Facility Development Corporation, Puttable Floating Option, York County Public Facilities Corp. – South Carolina, Texas Water Development Board, Georgia State Housing and Finance Authority, Santa Ana Community Redevelopment Agency – California, Houston Independent School District – Texas, Richland County – South Carolina, Massachusetts Housing Finance Agency, Massachusetts Health and Educational Facilities – North Shore Medical Center Inc., Texas Public Finance Authority, California Housing Finance Agency, State of California Variety Purpose, Antelope Valley Health Care District – California, Texas Department of Housing and Community Affairs – Single Family, City of Charlotte – North Carolina Maryland Community Development, and USA Notes					

(3) See explanation at page 4 of 24.

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Market Street New York Municipal Bond Trust – Delaware business trust – investments include: Municipal Assistance Corp. for the City of New York - New York, New York State Thruway Authority, Metropolitan Transportation Authority - New York, Power Authority of the State of New York, New York City Municipal Water Finance Authority New York State Environmental Facilities Corp., New York State Bridge Authority, Orange County - New York, New York City Transitional Finance Authority, Long Island Power Authority – New York, New York State, and Pierpont Money Market Fund (share – 23.12%)	I	(3)			
Market Street New York Municipal Bond Trust holdings disposed of during the year ended December 31, 1999 – municipal bonds of Niagara Falls Bridge Commission - New York, New York State Local Government Assistance Corp., and Port Authority of New York & New Jersey					
Market Street Equity Trust I - Delaware business trust – investments include Cygnus, Inc., Ashford Capital Partners Limited Partnership (investments in portfolio companies including: International Speedway Corp., Premier Parks Inc., PE Corp., Aaron Rents Inc., Ambassador International Inc., CMGI Inc., CSG Systems International Inc., Carlisle Holdings Lt., Central Parking Corporation, Copart Inc., Costar Group, Electronic Processing Inc., GTS Duratek Inc., Go2net Inc., Harbinger Corp., Home-seekers.com Incorporated, Mapinfo Corp., Mapquest Inc., Pegasus Systems Inc., Rowecom, Inc.,					

(3) See explanation at page 4 of 24.

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Kaiser Ventures, Inc., Western Water Series Preferred, Actel Corp., American Power Conversion Corp., Anaren Microwave Inc., Artesyn Technologies Inc., Littlefuse Inc., Mercury Computer Systems Inc., Plantronics Inc., Vitesse Semiconductor Corp., Miller Inds Inc., Brown & Brown Inc., Armor Holdings Inc., Valuevision International Inc., Anesta Corp., Applied Imaging Corp., Inhale Therapeutics System, Novametrix Medical Systems Inc., Theragenics Corp., Proxymed Inc., Allied Capital Corporation, Arcadia Financial Ltd., Cash America International, Federal Agricultural Mortgage Corp., Medallion Financial Corp., Daily Journal Corp., Cousins Properties Inc., Glenborough Realty Trust Inc., Gerald Steven Inc., Integral Systems Inc., Clarus Corp., Excalibur Technologies Corp., Kronos, Progress Software Corp., S1 Corporation, Telescan, Inc., Westpoint Stevens Inc., Carey International Inc., Biotechnology Investments, Inhale Therapeutics System, Preferred Employers Holdings Inc., Sepracor Inc., Wilmington Prime Money Market), Advanced Fibre Communications, Vantive Corp., Yahoo, Inc., Inktomi Corp., Siebel Systems, Inc., Amazon.Com, Inc., MP3.Com, Inc., Cygnus, Inc., Ariba, Inc., Critical Path, Inc., EBAY, Inc., Priceline.com, Inc., Planetrx.Com, Inc., Ondisplay, Inc., Westport Small-Cap Fund and Pierpont Money Market Fund (share – 2.57%)	I	(3)			
Market Street Equity Trust I holdings disposed during the year ended December 31, 1999 - Cellpro Inc., Peoplesoft, Inc. Xylan Corp., Centocor Inc., MMC Networks Inc., Industri-Matematik International Corp.					

(3) See explanation at page 4 of 24.

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Market Street Equity Trust II (See holdings listed above) (share – 1.51%)	I	(3)			
Market Street Equity Trust III - Delaware business trust - investments include: Washington Post Co., Aflac Inc., Berkshire Hathaway Inc., Progressive Corp. Ohio, Avon Products Inc., Coca Cola Co., Walt Disney Co., Dun & Bradstreet Corp., Gillette Co., Interpublic Group Companies Inc., RLI Corp., E.W. Scripps Howard, Inc., Chubb Corp., United Asset Management Corp., Tiffany & Co., AT&T Corp., AMBAC Financial Group Inc., First Union Corp., GTE Corp., Household International Inc., Valassis Communications Inc. and Pierpont Money Market Fund (share - 1.73%)	H	(3)			
Market Street Equity Trust III holdings disposed during the year ended December 31, 1999 - Federal National Mortgage Association, Federal Home Mortgage Corp., General RE Corp., AH Belo Corp., Markel Corp., Hearst-Argyle Television Inc., Jacor Communications Inc., Oakwood Homes Corp., Pulitzer Publishing Co., Longleaf Partners Fund and Sealed Air Corp.					
Market Street Venture Trust I – Delaware business trust – investments include: Piermont Money Market Fund, JP Morgan Funds, Market Street Fixed Income Trust I (see holdings listed above – share 9.7%, Paul Capital Partners Venture Limited Partnership (investments in portfolio companies at June 30, 1999 including: AXA, Rockefeller & Co., Taxol, IIVG, 4C, FTH, Abingworth 96, FT-PV, Boston Capital Ventures III Limited Partnership (investments in					

(3) See explanation at page 4 of 24.

UNITED STATES HOUSE OF REPRESENTATIVES

ETHICS IN GOVERNMENT ACT - 1999 FINANCIAL DISCLOSURE STATEMENT

AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset		Income		
	Category of Value	Alternative Valuation	Type of Income	Category of Income	Transaction
Trusts (continued):					
portfolio companies including: American Auto Funding Corp, Child Health Systems, Inc., International Cornerstone Group, Exa Corp., Advertising Communications, Inc., ILEX Oncology, Inc., Sensitech Inc., UniSite, Inc. , SCC Communications Corp., Intellon Corp., ICON Solutions, Inc. MedSpan, Inc., Olympus Healthcare, Inc., Omnia, Inc., Teletrac, Inc., Vertex Holdings, Inc., Brand Direct Marketing, Inc., Conservation Tourism, Ltd., Health Advance Institute, Inc., MGC Communications, Inc., 21st Century Cable, Inc., Vectrix Corp., BPT, Inc., MediaCom, Inc., Boston Millennia Partners Limited Partnership (investments in portfolio companies including: EC Cubed, Entigo, Fog Dog, Hot Jobs.Com, The Hurwitz Group, Infolibria, IParty, Knowledge Impact, More.Com, Net.Genesis, Double Twist, Oasis Technology, Tavolo, Tech Smart, Web CT, Yantra, Trivergent Communications, Personal Health Technologies, Proteome, Constellar Corp., Inventa Corp., iVillage, Inc., Quintessent Communications, Inc., V.I.A. Net.Works, Inc., Medspan, Inc., Quality Packaging Systems, Inc., BrandDirect Marketing, Inc. and Concentrix Corp.), CHL Medical Partners Limited Partnership (investments in portfolio companies including: Wellmark Healthcare Services, Inc., Coral Therapeutics, Inc., LocalMed, Inc., MicroProbe Corporation, Clinical Partners, Inc., Advanced Surgical, Inc., Envirogen, Inc., Imagyn Medical, Inc., CV Therapeutics, Inc., Cell Therapeutics, Inc., American Renal Associates, Inc., Boston Medical Technoliges, Comprehensive NeuroScience, Inc., Durect Corporation, InfiMed Therapeutics,					

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AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Inc., SemperCare, La Jolla Pharmaceutical Company, Inc., Khepri (Arris) Pharmaceuticals, Innotech, Inc., Celgene Corporation, Mycogen Corporation, Texas Biotechnology, Inc., Alexion Pharmaceuticals, Inc., Advanced Rehabilitation Resources, Inc., General Surgical Innovations, Inc., Raytel Medical Corporation, Leukosite, Inc., MegaBios (MBIO), Neurocrine Biosciences, Inc., Neurogen Corporation, ICOS Corporation, Intensive HealthCare Corporation, Ameripath, Inc., Geltex Pharmaceuticals, Inc., Procyte Corporation, Cambridge Biosciences, Inc., DNA Plant Technology Corporation, Chiroscience Ltd., Genetic Systems Corp. Inc., Incyte Pharaceuticals, Inc., Nova Pharmaceutical Coporation, Aurora Biosciences Corp., Emergency Medical Systems, Inc., Cellular Genomics, Molecular Staging, Inc, Prolifix Medical, Inc. and Vida HealthCare, Inc.), Exeter Capital Partners IV Limited Partnership (investment in portfolio companies including: The Sheridan Group, Inc., Linters, Inc., Kitchen, Etc., Inc., Boston Medical Technologies, Inc., Brooks Equipment Co., Inc., Consolidated Delivery & Logistics, Inc., Fed Corporation, Progressive International, Inc., Ravisent Technologies, Inc., TVC/ Communication Dynamics, Inc., United Pet Group, Inc., Vision Play LLC, Facts on File, Inc., FiberNet Telecom Group, Inc., Horizon Food Group, Inc., K Media Inc., LOIS, Inc., Mail.Com, Inc., NorthPoint Communications Dynamics, Inc.), Intersouth Partners IV Limited Partnership (investment in portfolio companies including: Alerts.Com, Extensibility, Fovean, Iaxess, Xanthon, Biolex, Inc., Opensite, Intercardia, Invoice Link, and Paradigm Genetics), PCP Associates Limited Partnership					

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SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
(investments in portfolio companies including: Fianciere Tuileries VI, JK&B Capital, L.P., Cedar Creek II Limited Partnership, Boston Capital Ventures III, L.P., Maloney Holding L.P., North Castle Partners I L.L.C., Boston Capital Ventures II, L.P., Sanderling Ventures Limited, Supermarkets Holding L.P., North Castle Partners I-A, L.P.), Labrador Ventures IV Limited Partnership (investments in portfolio companies including: Eba Systems, Savings Time, United Messaging, StartSmart, iVendor, Access Media, DoughNet, Info Gear, HomePortfolio, iSyndicate, MyPoints, and Family Point), The Megunticook Fund II Limited Partnership (investments in portfolio companies including: Television Food Network, America's Health Network, Peapod, StarSight, Linkatel, Lightship Telecom, Modify.com, Art Technology Group, Passport New Media, Revbox, Inc., Telephia, Inc.), ZN Mexico Trust (the only security in this portfolio is Desarolladora Homex), Tape II, Limited Partnership (investments in portfolio companies including: ABS Capital Partners, Cypress Merchant Banking Partners, Madison Dearborn Partners, TA Associates, Inc., Austin Ventures, Battery Ventures, New Enterprise Associates, Frazier & Company, Spectrum Equity Investors, Summit Partners Subordinated Debt), ILEX Oncology, Inc. and BEA Systems Inc. (share - 2.52%)	H	(3)			
Market Street Venture Trust II – Delaware business trust – investments include: Pierpont Money Market Fund, Market Street Fixed Income Trust I (see holdings listed above - share .21%), Blue Rock Capital Limited Partnership (investments in portfolio companies including: Momentum Partners,					

(3) See explanation at page 4 of 24.

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AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Inc., Edison Schools., Inc., Integrated Chipware, Inc., SegWay Internet Technologies, Inc., MIDAS Vision Systems, Inc., Net Balance Inc., ChannelWave, Inc., Fact City, Inc., Gain Capital, Inc., GroceryWorks.Com, Inc., Just Balls, Inc., LockStar, Inc., Museum Shop.Com, Inc., NexTone Communications, NxtWave Communications, Inc., Response Networks, Inc., Sovereign Hill Software, Inc., Tellium, Inc.,and TrainingNet, Inc), Baker Communications Fund (investments in portfolio companies including: Advance Switching Communications, Inc., Nextpoint Networks Inc., NetOps Corporation, Connected Corp., Sequoia Software Corp., Curl Corp., Interxion Holdings, Nevada, AKAMAI Technologies, Inc., Broad View Networks, Acvent, Inc., Fort Point Partners, Inc., QS Communication AG, S2 Systems, Inc., and Style 365.Com) and Oxford Bioscience Partners II Limited Partnership (investments in portfolio companies including: Gene Logic, Arevia, ArgoMed, Artemis, Astex, Biocode, Inc., Cardiopulmonary, Cellomics, Ceres, Coelacanth, CombiChem, CPBD Inc., Cytologix, Entomed, EVAX, ExonHit Therapeutics, FamilyMed.com (formerly Arrow), GENiCON, Guidestar Health Systems, Inkine Pharmaceutical Company, Memory Pharmaceuticals, Message, MicroMed, Mosaic, NetGenics, Inc., Orchid Biocomputer, Phase-1, Physiome Sciences, Inc., SciQuest, and Variagenics, Inc.) (share - 2.89%)	E	(3)			
Market Street International Equity Trust I – Delaware business trust – investments include: GMO Foreign Fund, Harbor International Growth Fund, Harbor International Fund and Pierpont Money Market Fund (share - 2.47%)	I	(3)			

(3) See explanation at page 4 of 24.

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SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source*	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Market Street International Equity Trust II – Delaware business trust – investments include: GMO Emerging Markets Fund, Morgan Stanley Emerging Markets and Pierpont Money Market Fund (share – 1.91%)	H	(3)			
Partnerships:					
Corning Associates VC-3, investment in venture capital partnership (share – 3.57% /.051%**): Abbingdon Venture Partners LP-III, managed by the Foster Management Co., King of Prussia, PA; organized to invest in companies primarily in the health services industry	D	(2)			
Osprey Partners, LLC – investment in Lightship Holdings LLC: organized to invest primarily in telephone technology (share – 14.49%/5.32%**)	E	(2)			
Real Estate:					
Residence (occupied by the Congressman), Washington, DC	I				
Other:					
Corning Incorporated – common stock	J				
Demand notes receivable from Amory Houghton Jr.	G				
Mortgage receivable from Amory Houghton III	I				
Principal cash - interest bearing (J.P. Morgan Delaware)	H				
Income cash - interest bearing (J.P. Morgan Delaware)	C				
Other cash – interest bearing (J.P. Morgan Delaware)	J				
GMO International Small Companies Fund – mutual fund, Boston, MA (sold in 1999)	A				
Longleaf Partners Fund – mutual fund, Kansas City, MO (sold in 1999)	A				
Vanguard Extended Market Portfolio - mutual fund, Philadelphia, PA	G				

** See explanation at page 3 of 24.
(2) See explanation at page 3 of 24.
(3) See explanation at page 4 of 24.

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AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Vanguard Mid-Cap Index Fund Institutional - mutual fund, Philadelphia, PA	G				
Vanguard Institutional Index Fund – mutual fund, Philadelphia, PA	G				
Dividend receivable, Vanguard Extended Market Portfolio - mutual fund	C				
Dividend receivable, Vanguard Institutional Index – mutual fund	C				
Dividend receivable, Vanguard Mid-Cap Fund Institutional – mutual fund	C				
Dividend receivable, Longleaf Partners Fund – mutual Fund (The Longleaf Partners Fund investment was sold in 1999)	A				
Amory Houghton Jr. Trust 12/10/34 - (interest in income and limited principal)			Trust	VIII	
Holdings consist of:					
Trusts (see holdings listed above):					
Market Street Fixed Income Trust I (share - .79%)	I	(3)			
Market Street New York Municipal Bond Trust (share - 24.99%)	I	(3)			
Market Street Equity Trust II (share – 1.78%)	I	(3)			
Market Street Equity Trust III (share - 2.18%)	I	(3)			
Market Street Equity Trust I (share - 1.50%)	H	(3)			
Market Street Venture Trust I (share – 1.65%)	G	(3)			
Market Street Venture Trust II (share - 2.59%)	E	(3)			
Market Street International Equity Trust I (share - 1.39%)	H	(3)			
Market Street International Equity Trust II (share - 1.59%)	H	(3)			
Partnerships:					
Corning Associates VC-3 (see holdings listed above) (share - 1.58%/.02%**)	C	(2)			
Market Street Trust Company Investment Partnership I, invested in JPM 1996 Alpha, LLC partnership (share - 5.73/.32%**):					

** See explanation at page 3 of 24.
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SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
JPM 1996 Alpha LLC, managed by J.P. Morgan D.E.; organized to diversify in low basis stocks (investments include: AT&T Corp. Campbell Soup Co., Compaq Computer, Corning Inc., du Pont de Nemours, Eli Lilly & Co., Enron Corp., International Flavors, Lucent Technologies, Boeing, Inc., Viasic, American International Group, United Asset Management and Midland Preferred Stock)	H	(2)			
Other:					
Corning Incorporated – common stock	J				
Mortgage receivable from Katherine Q. Houghton	F				
Principal cash - interest bearing (J.P. Morgan Delaware)	H				
Income cash - interest bearing (J.P. Morgan Delaware)	C				
Other cash - interest bearing (J.P. Morgan Delaware)	J				
GMO International Small Companies Fund – mutual fund, Boston, MA (sold in 1999)	A				
Longleaf Partners Fund – mutual fund, Kansas City, MO (sold in 1999)	A				
Vanguard Extended Market Portfolio – mutual fund, Philadelphia, PA	E				
Vanguard Institutional Index – mutual fund, Philadelphia, PA	G				
Vanguard Mid-Cap Index Fund Institutional – mutual fund, Philadelphia, PA	G				
Dividend receivable, Vanguard Extended Market Portolio – mutual fund	B				
Dividend receivable, Vanguard Institutional Investment – mutual fund	B				
Dividend receivable, Vanguard Mid-Cap Index Fund Institutional – mutual fund	C				
Dividend receivable, Longleaf Partners Fund – mutual fund (the Longleaf Partners Fund Investment was sold in 1999)	A				

(2) See explanation at page 3 of 24.

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AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Elisabeth Houghton Trust 12/10/34 - (interest in 1/15 income only)			Trust	VII	
Holdings consist of:					
Trusts (see holdings listed above):					
Market Street Fixed Income Trust I (share - .62%)	I	(3)			
Market Street Equity Trust I (share - .52%)	G	(3)			
Market Street Equity Trust II (share - .41%)	G	(3)			
Market Street Equity Trust III (share - .48%)	F	(3)			
Market Street Venture Trust I (share - .59%)	F	(3)			
Market Street Venture Trust II (share - .52%)	C	(3)			
Market Street International Equity Trust I (share - .43%)	F	(3)			
Market Street International Equity Trust II (share - .48%)	F	(3)			
Partnerships (see holdings listed above):					
Corning Associates VC-3 (share - .479%/.007%**)	C	(2)			
Market Street Trust Company Investment Partnership I (share - .72%/.09%**)	F	(2)			
Other:					
Corning Incorporated - common stock	I				
Principal cash – interest bearing (J.P. Morgan Delaware)	F				
Income cash – interest bearing (J.P. Morgan Delaware)	B				
Other cash – interest bearing (J.P. Morgan Delaware)	I				
Harbor International Fund - equity mutual fund, Toledo, OH (sold in 1999)	A				
GMO International Small Companies Fund - mutual fund, Boston, MA (sold in 1999)	A				
Longleaf Partners Fund - mutual fund, Kansas City, MO (sold in 1999)	A				
Vanguard Extended Market Portfolio - mutual fund, Philadelphia, PA	E				
Vanguard Institutional Index – mutual fund, Philadelphia, PA	E				

** See explanation at page 3 of 24.
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AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Vanguard Mid-Cap Index Fund Institutional – mutual fund, Philadelphia, PA	D				
Dividend receivable, Vanguard Extended Market Portfolio – mutual fund	C				
Dividend receivable, Vanguard Institutional Index – mutual fund	C				
Dividend receivable, Vanguard Mid-Cap Index Fund Institutional – mutual fund	C				
Dividend receivable, Longleaf Partners Fund – mutual fund (The Longleaf Partners Fund investment was sold in 1999)	A				
Sidney Cole Trust U/W A.B. Houghton12/10/34 - (interest in 1/8 income only)			Trust	I	
Holdings consist of:					
Trust (see holdings listed above):					
Market Street Fixed Income Trust I (share - .14%)	F	(3)			
Market Street Equity Trust I (share - .12%)	E	(3)			
Market Street Equity Trust II (share - .22%)	F	(3)			
Market Street Equity Trust III (share - .13%)	E	(3)			
Market Street Venture Trust I (share - .19%)	D	(3)			
Market Street Venture Trust II (share - .14%)	C	(3)			
Market Street International Equity Trust I (share - .17%)	E	(3)			
Market Street International Equity Trust II (Share - .19%)	D	(3)			
Partnerships (see holdings listed above): Corning Associates VC-3 (share -.193%/.003%**)	C	(2)			
Other:					
Corning Incorporated – common stock	H				
Principal cash - interest bearing (J.P. Morgan Delaware)	D				
Other cash – interest bearing (J.P. Morgan Delaware)					
Income cash – interest bearing (J.P. Morgan Delaware)	B				

** See explanation at page 3 of 24.
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AMORY HOUGHTON JR.

SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Other cash – interest bearing (J.P. Morgan Delaware)	G				
GMO International Small Companies Fund – mutual fund, Boston, MA (sold in 1999)	A				
Longleaf Partners Fund - mutual fund, Kansas City, MO (sold in 1999)	A				
Vanguard Extended Market Portfolio – mutual fund, Philadelphia, PA	D				
Vanguard Institutional Index – mutual fund, Philadelphia, PA	D				
Vanguard Mid-Cap Index Fund Institutional – mutual fund, Philadelphia, PA	C				
Dividend receivable, Vanguard Extended Market Portfolio – mutual fund	B				
Dividend receivable, Vanguard Institutional Index – mutual fund	B				
Dividend receivable, Vanguard Mid-Cap Fund Institutional – mutual fund	B				
John C. Dewey Jr. Trust - (Priscilla Dewey Houghton - beneficiary, interest in income only)			Trust	VI	
Holdings consist of:					
Common stock:					
Abbott Labs	F				
American Home Products Corp.	E				
Amp Inc. (sold in 1999)	A				
Atlantic Richfield Co.	E				
Automatic Data Processing Co.	C				
Bellsouth Corp.	F				
Bestfoods Co.	D				
Chevron Corp.	E				
Coca Cola Co.	F				
Equity Office Pptys Trust Co.	D				
FPL Group Inc.	E				
General Electric Co.	G				
Hewlett Packard Co.	E				
Intel Corp.	D				
Lucent Technologies, Inc.	D				
MBIA Inc.	D				
Minnesota Mining and Manufacturing Co.	D				
National City Corp.	E				
New England Electric	D				
Norfolk Southern Corp.	C				
Reuters Holding plc	E				

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SCHEDULE III - ASSETS AND UNEARNED INCOME

Asset and/or Income Source	Valuation of Asset: Category of Value	Valuation of Asset: Alternative Valuation	Income: Type of Income	Income: Category of Income	Transaction
Trusts (continued):					
Schering Plough Corp.	F				
Tyco International Limited	D				
Other:					
Federated Government Tax Managed Fund, Pittsburgh, PA	C				
Talbot Dewey Trust 11/20/80 - (Priscilla Dewey Houghton – beneficiary, interest in income only)			Trust	II	
Holdings consist of:					
Common stock:					
American International Group	D				
American Home Products Corp.	D				
Automatic Data Processing Inc.	D				
Exxon Corp.	C				
FPL Group Inc.	C				
Illinois Tool Works, Inc.	C				
Intel Corp.	D				
Interpublic Group Consulting Inc.	D				
Minnesota Mining and Manufacturing Co. (sold in 1999)	A				
Sherwin Williams Co. (sold in 1999)	A				
Wachovia Corp.	C				
U.S. Government Obligations:					
Treasury notes (sold in 1999)	A				
Other:					
Federated Government Tax Managed Fund, Pittsburgh, PA	C				

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IV – TRANSACTIONS

Identification of Asset	Transaction Type	Date	Amount of Transaction
Corning Incorporated – common stock	Gift (4)	12/14/99, 12/16/99	C
Genetech Corporation – common stock	Sale	6/30/99	E
Gemstar International Group Ltd – common stock	Sale	2/25/99, 9/8/99	F
Market Street Trust Company	Exchange	4/1/99, 4/14/99	F
Market Street Equity Trust (MSTC II)	Sale	11/1/99	B
Market Street Partners, LLC	Exchange	4/1/99	E
Longleaf Partners Fund	Purchase	11/9/99	B

Market Street Equity Trust (MSET II) – During 1999, the Trust sold an equity interest in Cisco Systems (category H), Dollar General Corporation (category H), General Electric Company (category G), IMS Health, Inc. (category H), Intel Corporation (category H), JP Morgan Money Market Sweep (category I), Coca-Cola (category H), Eli Lilly & Company (category H), Microsoft (category H), Pfizer (category H), Proctor & Gamble (category H), J.P. Morgan Funds (category J), Walgreen Company (category H), WW Wrigley Jr. Company (category H), purchased equity investments in Auto Data Processing (category G), Autozone, Inc. (category G), CVS Corporation (category H), Dell Computer Corporation (category H), Dollar General Corporation (category H), Gap, Inc. (category H), Gateway, Inc. (category H), IMS Health, Inc. (category G), J.P. Morgan Money Market Sweep (category I), Eli Lilly & Company (category H), McDonalds – w/Rights (category H), Merck & Company (category H), Proctor & Gamble (category H), J.P. Morgan Funds (category J), Rentokil Group PLC (category H), Stryker Corporation (category H), Servicemaster Company (category H), WW Wrigley Jr. Company (category H). No other reportable transactions given the marginal personal investment in MSET II is less than ¼ of 1% and the Congressman's direct interest in various other purchases or sales was below the $1,000 reporting threshold.

SCHEDULE V - LIABILITIES

Creditor	Type of Liability	Category
Amory Houghton Jr. Trust U/W A.B. Houghton	Notes Payable	F
Chase Manhattan Bank N.A., Corning, NY	Notes Payable on 76-78 East Market Street investment property	F
Chase Manhattan Bank, N.A., Elmira, NY	Notes Payable	D

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Source	Dates	Point of Departure Destination Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was family member included? (Y/N)	Any time not at Sponsor's Expense? (Y/N)
Aspen Institute Conference *Pathways to Adult Success for All Youth*	February 12-15	Washington, DC St. Petersburg, FL Washington, DC	Y	Y	Y	N
Corning Incorporated Public Policy Conference	October 29-31	Washington, DC Augusta, GA Washington, DC	Y	Y	N	N

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SCHEDULE VIII – POSITIONS

Non-Profit Affiliations:
- The Meadows Charitable Trust - Trustee
- The Houghton Foundation - Trustee
- The Washington Cathedral Chapter - Inactive Trustee
- Corning Chamber of Commerce - Member
- Corning Museum of Glass - Trustee

Director:
- Market Street Trust Company

Congressman Houghton is also a limited partner in each of the partnerships previously listed in Schedule III with the exception of Acorn IV where he serves as a general partner.

SCHEDULE IX - AGREEMENTS

Date	Parties to	Terms of Agreement
2/87	Retired employee of Corning Incorporated and beneficiary of certain Company retirement pension and health plans	Benefits received in accordance with normal plan provisions (monthly).
2/87	Corning Incorporated (former employer)	Transportation benefits - any retired employee (or immediate family member) is permitted to travel on the Company plane subject to space availability and without charge. For income tax purposes only, income is imputed to the retiree based upon the prevailing commercial airline value of the trip and reported by the Company on federal Form-1099 MISC if in excess of $600. Congressman Houghton elects to reimburse Corning Incorporated, based on the prevailing commercial airline value of the trip, for use of the Company plane.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Kenny Charles Hulshof
(Full Name)

24 Bingham Rd
(Mailing Address)

Columbia MO 65203

Daytime Telephone: 573/874-1682

Filer Status	[X] Member of the U.S. House of Representatives	State: MO District: 09	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [X] No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Kenny C. Hulshof	5/15/00

22271

Name Kenny Charles Hulshof	Page ___ of ___

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Vangel Associates	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name Kenny Charles Hulshof	Page ___ of ____

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	KMart	appearance/race	9/22/99	$2,000.00

Name Kenny Charles Hulshof	Page ____ of ____

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
SP American Century	$15,001 - $50,000	Dividends	None	
MO State Employee Retirement	$1,001 - $15,000	Dividends	None	
JT Bank of America, Columbia, MO. accts	$1 - $1,000	Interest	$1 - $200	
JT First National Bank, Columbia, MO accts	$1,001 - $15,000	Interest	$201 - $1,000	

Name Kenny Charles Huishol	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000

Name Kenny Charles Hulshof	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	First USA Visa	Charge Account	$10,001 - $15,000

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Name	Page ____ of ____

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name Kenny Charles Hulshof	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Chicago Mercantile Exchange/Board of Trade	08/29/99 - 08/30/99	Columbia, MO -Chicago, IL - Colubia, MO	Y	Y	N	No
Tax Foundation	01/14/99 - 01/15/99	Jacksonville - Amelia Island, FL - Washington DC	Y	Y	N	No
Farm Credit Council	01/17/99 - 01/19/99	St. Louis, MO - San Antonio, TX - Washington DC	Y	Y	N	No
Aspen Institute	03/19/99 - 03/21/99	Washington DC - Hershey, PA - Washington DC	Y	Y	Y	No

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Name	Page ___ of ___

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization

Name	Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

DUNCAN LEE HUNTER
(Full Name)

2265 Rayburn HOB
(Mailing Address)

Daytime Telephone

Washington, DC 20515 (202) 225-5672

Filer Status	[X] Member of the U.S House of Representatives	State: District:	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Duncan Lee Hunter	5/15/00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

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Name DUNCAN LEE HUNTER	Page 3 of 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	NONE			

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Name DUNCAN LEE HUNTER

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP), or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C								Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X								X										X									P
			Simon & Schuster		Indefinite																Royalties									X				
			1st Bank of Paducah, KY accounts					X									X									X								
	25 Acres, Warren Cty, VA					X										X	(2 acres rented)								X									
	Cabin #2, Warren Cty, VA					X										X									X									
JT	5/8 Acre Lot, Riverside, CA					X									NONE							X												
*JT	House, Walney Rd, Chantilly VA									X					NONE							X												
*JT	Stable/Barn, Chantilly, VA					X									NONE							X												

*Subject to sales contract entered into 10/8/98

For additional assets and unearned income, use next page.

Name DUNCAN LEE HUNTER

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	N/A														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	BANK OF AMERICA CREDIT CARD	REVOLVING CREDIT		X								
JT	VALLEY DE ORO BANK, EL CAJON, CA	PERSONAL LOAN	X									
JT	CONGRESIONAL FEDERAL CREDIT UNION, WASH,DC	PERSONAL LOAN	X									
	ISABELLE MOSKEY, STERLING, VA	LOAN, MTN PROPERTY, WARREN COUNTY, VA	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Safari Club, International	Jan 21-23	San Diego-Reno, NV-San Dgo (Did not accept transportation)	Y	Y	Y	N
	Aspen Institute	Mar 19-21	Wash,DC-Hershey,PA-Wash,DC	Y	Y	Y	N
	Claremont Institute	Jun 4-6	San Diego-St Barbara-SDiego (Member Drove on his own)	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Co-Chairman	National Security Caucus
Board Member	American Conservative Union
Partner	Cabin # 2 with Pete Geren in Blue Ridge Mtns, Warren Cty, VA

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

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Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

William Asa Hutchinson
(Full Name)

1108 Adelaide Avenue
(Mailing Address)

Fort Smith AR 72901

Daytime Telephone: 202 225 4301

Filer Status	[X] Member of the U.S. House of Representatives	State: AR District: 03	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**		X
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	X	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Asa Hutchinson	5/15/00

2245

Name William Asa Hutchinson | Page 2 of 7

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Karr & Hutchinson	Hutchinson Gross Attorney Fee	$0.00
	Fort Smith Public School	Spouse Salary-Substitute Teacher	NA
	Coral Hutchinson Estate (mother's estate)	Executor's Fee	$2,600.00

For payments to charity in lieu of honoraria, use Schedule II.

Name William Asa Hutchinson	Page ___ of ____

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	Politically Incorrect, Los Angeles, CA	Appearance	8/23/99	$500.00
	K-Mart Race Against Drugs, Washington, DC	Race	9/22/99	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	First National Bank, Ft. Smith, Checking		$1,001 - $15,000	Interest	$1 - $200	
JT	National Traveler's Life Insurance Annuity Fund		$1,001 - $15,000	Interest	$201 - $1,000	
JT	City National Bank, Ft. Smith, Checking		$1 - $1,000	Interest	$1 - $200	

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SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	City National Bank, Ft. Smith, AR	Promissory Note	$15,001 - $50,000
	First National Bank, Ft. Smith, AR	Promissory Note	$50,001 - $100,000
	MBNA, Wilminton, DE	Personal Loan	$15,001 - $50,000
	First National Bank, Ft. Smith, AR	Promissory Note, Business	$10,001 - $15,000
	Traveler's Bank, Carol STream, IL	Personal Loan	$10,001 - $15,000
	G.E. Capital, Tempe, AZ	Personal Loan	$10,001 - $15,000

Name William Asa Hutchinson | Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
American College of Trial Lawyers-Speak	Mar. 12-13	Wash., D.C.-Naples, FL-Memphis, TN	Y	Y	Y	0
Quinnipeac College School of Law-Speak	Mar. 21	Harrisburg, PA-New Haven, CT	Y	Y	N	0
Harvard Law School Forum-Speak	Mar. 23	Hartford, CT-Cambridge, MA-Washington, DC	Y	Y	N	0
Texas General Counsel Group-Speak	Apr. 9	Ft. Smith, AR-Dallas, TX-Austin,TX	Y	Y	N	0
Politically Incorrect-Speak	Aug. 22-24	Ft. Smith, AR-LA, CA, Fayetteville, AR	Y	Y	Y	1 day
Colorado Bar Assn.-Speak	Sept. 26	Ft. Smith, AR-Vail, CO-Washington, DC	Y	Y	Y	0

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
12/31/96	Charles Karr	Agreement on Termination of Karr & Hutchinson Partnership regarding payout for legal fees earned but not collected before termination

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 2:21

(4)

HAND DELIVERED
(Office Use Only)

Henry J. Hyde
(Full Name)

2110 Rayburn House Office Building
(Mailing Address)

202-225-4561
Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: District:	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Henry J. Hyde	5-15-2000

2252

Name	Henry J. Hyde	Page 2 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Illinois General Assembly Retirement	Legislative pension	$6660.24

For payments to charity in lieu of honoraria, use Schedule II.

Name Henry J. Hyde

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT — *Examples:* SP — Mega Corp. Stock			DIVIDENDS: X	IV: X	P
Examples: Simon & Schuster		Indefinite	Other Type of Income: Royalties	IX: X	
Examples: 1st Bank of Paducah, KY accounts		F: X	INTEREST: X	VI: X	
Congressional Federal Credit Union , Washington D.C.		F: X	INTEREST: X	III: X	
White House Federal Credit union, Washington, D.C.		D: X	INTEREST: X	NA/ IRA	

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Christendom College, NYC	Oct. 1-2	Wash., DC - NYC - Wash. DC	Y	Y	N	N
	Claremont Institute, LA	Nov. 20-21	Chicago - LA - Chicago	Y	Y	N	N
	Kansas State Univ.	Nov. 30 - Dec. 1	Chicago - KC - Chicago	Y	Y	N	N
	Forum Club -Naples, FL	Dec. 2-3	Chicago - Ft. Meyers - Chicago	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 4:11

(10)

HAND DELIVERED
(Office Use Only)

JAY ROBERT INSLEE
(Full Name)

579 AZALEA NE
(Mailing Address)

(202) 225-6311
Daytime Telephone

BAINBRIDGE ISLAND, WA 98110

Filer Status	[X] Member of the U.S. House of Representatives	State: WA District: 01	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 15, 2000

2256

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Dr Steven Schwager	Spouse Salary	10,873.00

For payments to charity in lieu of honoraria, use Schedule II.

Name Jay Robert Inslee | Page 3 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts					X									X									X							
DC	Cisco Systems				X																	X											
DC	Microsoft				X																	X											
DC	Realnetworks				X																	X											
DC	Smith Barney Money Funds				X												X							X									
DC	Microsoft				X																	X											
DC	Realnetworks				X																	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jay Robert Inslee

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
DC	Starbucks		X																		X											
DC	Microsoft			X																	X											
DC	Realnetworks			X																	X											
DC	Smith Barney Mutual Funds		X													X						X										
	Bristol Myers Squibb													X								X										
	Cisco Systems					X															X											
	Citigroup				X									X									X									
	General Electric				X									X									X									
	~~Intel~~ Intel				X																X											
	Lucent Tech			X										X								X										
	MCI World Com				X																X											
	Medtronic			X										X								X										
	Microsoft					X															X											
	Pfizer			X										X								X										
	Realnetworks					X															X											
	Starbucks			X																	X											
	Texas Instruments				X									X								X										
	Time Warner			X										X								X										
	Smith Barney Mutual Funds	X														X							X									
SP	Texas Instruments			X										X								X										
SP	Realnetworks			X																	X											
SP	Microsoft				X																X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jay Robert Insler

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Medtronic			X																	X											
SP	Cisco Systems			X																	X											
SP	S.B. Money Funds			X												X							X									
JT	Congressional Fed. Credit Union			X												X						X										
JT	North Sound Bank			X												X						X										
SP	BS QUARE			X																	X											
	LORD ABBOTT DEVELOPMENT	X															X							X								
	MAINSTAY CAPITOL APPRC	X															X										X					

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SCHEDULE IV — TRANSACTIONS

Name Jay Robert Inslee

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10-12-99		X								
DC	Cisco Systems		X		12-22-99	X									
DC	Microsoft		X		12-22-99	X									
DC	Realnetworks		X		12-22-99		X								
DC	Cisco Systems	X			10-12-99	X									
DC	Realnetworks	X			4-21-99	X									
DC	Realnetworks	X			4-21-99	X									
DC	Starbucks	X			7-12-99	X									
DC	Realnetworks		X		4-19-99	X									
DC	Realnetworks	X			4-21-99	X									
	Lord Abbott Development Growth		X		1-29-99	X									
	Mainstay Capital Appreciation		X		1-29-99		X								
	Realnetworks		X		1-12-99		X								
	Realnetworks		X		4-19-99			X							
	Realnetworks		X		4-12-99			X							
	Realnetworks		X		3-23-99		X								
	Bristol Myers Squibb	X			4-16-99	X									

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SCHEDULE IV — TRANSACTIONS

Name Jay Robert Inslee

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Citigroup	X			4-16-99	X									
	Citigroup	X			10-12-99	X									
	Cisco Systems	X			1-29-99		X								
	General Electric	X			4-16-99		X								
	Intel	X			6-19-99	X									
	Lucent Tech	X			4-16-99	X									
	Medtronic	X			10-12-99	X									
	Pfizer	X			4-16-99	X									
	Realnetworks	X			4-21-99		X								
	Realnetworks	X			10-8-99	X									
	Time Warner	X			4-16-99	X									
	Texas Instruments	X			4-16-99		X								
	MCI World Com	X			4-16-99		X								
	MCI World Com	X			10-12-99	X									
SP	Real Networks		X		1-12-99	X									
SP	Realnetworks		X		4-19-99	X									

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SCHEDULE IV — TRANSACTIONS

Name JAY ROBERT INSLEE | Page 8 of 10

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	REAL NETWORKS		X		5-23-99	X									
SP	BSQUARE	X			11-22-99	X									
SP	CISCO SYSTEMS	X			5-12-99	X									
SP	MEDTRONIC	X			10-12-99	X									
SP	REAL NETWORKS	X			9-21-99	X									
SP	TEXAS INSTRUMENTS	X			5-12-99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Sierra Club	July 17-18	Seattle → Leavenworth → Seattle	Y	Y	Y	N
	Progress + Freedom Foundation	Aug 23-29	Seattle - Aspen - Seattle	Y	Y	Y	4 days
	CEMA Govt + Legal affairs	Jan 8-10	WaDC → Las Vegas, NV → Seattle	Y	Y	N	N
	America's Community Bankers	Nov 1-2	Wa.D.C. → Orlando, Fl. → WaDC	Y	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
ADVISOR	BOYS AND GIRLS CLUB OF BAINBRIDGE ISLAND
HONORARY BOARD MEMBER	WASHINGTON WILDLIFE & RECREATION COALITION

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

JOHNNY ISAKSON
6TH DISTRICT, GEORGIA

EDUCATION AND THE WORKFORCE
WORKFORCE PROTECTIONS
POSTSECONDARY EDUCATION, TRAINING AND LIFE-LONG LEARNING

TRANSPORTATION AND INFRASTRUCTURE
AVIATION
OVERSIGHT, INVESTIGATIONS AND EMERGENCY MANAGEMENT

Congress of the United States
House of Representatives
Washington, DC 20515–1006

WASHINGTON OFFICE:
2428 RAYBURN BUILDING
WASHINGTON, DC 20515–1006
(202) 225–4501
FAX: (202) 225–4656

DISTRICT OFFICE
6000 LAKE FORREST DRIVE
SUITE 110
ATLANTA, GA 30328
(404) 252-5239
FAX: (404) 303–1260

http://www.house.gov/isakson

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MC (20)

May 9, 2000

The Clerk, U. S. House of Representatives
Legislative Resource Center
B 106 Cannon House Office Building
Washington, D.C. 20515-6612

Dear Sir,

Enclosed with this letter, is my complete Financial Disclosure Statement for the calendar year 1999.

On Schedule I (Earned Income) the director's fees from First Multiple Listing Service and Riverside Bank were for Board Meetings prior to my election to Congress on February 23rd. The salary from Fairgreen Capital was for the months of January and February prior to my election to Congress. The $60,000 in item four from Fairgreen Capital was income earned in 1998 but paid in 1999 (see letter of 5-25-99 attached). The $40,000 in item five from Fairgreen Capital was deferred compensation pursuant to the agreement between me and Fairgreen as disclosed (see letter of 3-26-99 attached).

If there are any questions please do not hesitate to call.

Sincerely,

Johnny Isakson
MOC

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LEGISLATIVE RESOURCE CENTER
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U.S. HOUSE OF REPRESENTATIVES

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

John Hardy Isakson
(Full Name)
5074 Hampton Farms Drive
(Mailing Address)
Marietta, GA 30068
Daytime Telephone 202-225-4501

Filer Status	☒ Member of the U.S. House of Representatives — State GA District 06	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☒	No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/9/00

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Name	Page
Johnny Isakson	1 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
1	FIRST MULTIPLE LISTING SERVICE (FOR JAN & FEB BOARD MEETING PRIOR TO ELECTION)	DIRECTOR FEE	4,000
2	RIVERSIDE BANK (FOR JAN BOARD MEETING PRIOR TO ELECTION)	" "	500
3	FAIRGREEN CAPITAL (SALARY EARNED FOR JAN. AND FEB PRIOR TO ELECTION TO CONGRESS)	SALARY	50,000
4	FAIRGREEN CAPITAL (INCOME EARNED IN 1998 BUT PAID IN 1999 - SEE ATTACHED LETTER DT 5/25/99	COMPENSATION	60,000
5	FAIRGREEN CAPITAL (DISCLOSED AGREEMENT BETWEEN FAIRGREEN AND JOHNNY ISAKSON IN SCHEDULE IV AND ATTACHED LETTER DATED 3-26-99	DEFERRED COMPENSATION AGREEMENT	40,000
6	CEST MOI	SPOUSE SALARY	11,722

For payments to charity in lieu of honoraria, use Schedule II.

Name JOHNNY ISAKSON | Page 2 of 13

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Examples:			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT		SP	Mega Corp. Stock					X								X										X								P
			Simon & Schuster			Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X									X										X						
	Stricklin Capital									X							X	X	X			SCORP								X				
	3074 HAMPTON FARMS DRIVE (RESIDENCE)									X													X											
	FIDELITY PURITAN MUTUAL FUND						X									X			X						X									
	FIDELITY ADVISORS GRO MUTUAL FUND						X									X			X							X								
	TEMPLETON GROWTH MUTUAL FUND						X									X			X							X								
	EVER GREEN GROWTH & INCOME MUTUAL FUND					X										X			X						X									

* REAL ESTATE OWNED BY FAIRGREEN CAPITAL ATTACHED

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHNNY ISAKSON

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	FORD MOTOR CREDIT NOTE	D	INTEREST	IV	
	MCI CAPITAL I PREFERRED	D	DIVIDENDS	IV	
	ALABAMA POWER CO PREFERRED	D	DIVIDENDS	IV	
	ABBOTT LABS STOCK	D	DIVIDENDS	III	P
	AMERICAN EXPRESS STOCK	F	DIVIDENDS	IV	S
	BURLINGTON STOCK	C	DIVIDENDS	II	
	CHUBB CORP STOCK	C	DIVIDENDS	II	
	WALT DISNEY STOCK	E	DIVIDENDS	III	
	EMC CORP MASS STOCK	D	DIVIDENDS; I		P
	CISCO SYSTEMS STOCK	E	DIVIDENDS; I		P
	COLGATE PALMOLIVE CO STOCK	D	DIVIDENDS	III	P
	GANNETT INC STOCK	F	DIVIDENDS	V	
	GENERAL ELECTRIC STOCK	D	DIVIDENDS	III	P
	FEDERAL HOME LOAN MORTGAGE CORP STOCK	D	DIVIDENDS	III	P
	GILLETTE CO STOCK	D	DIVIDENDS	III	P
	MEDIA ONE GROUP STOCK	C	DIVIDENDS; I		P
	OMNICOM GROUP STOCK	D	DIVIDENDS	II	P
	SYSCO CORP	D	DIVIDENDS	III	P
	AMI GROUP STOCK	D	DIVIDENDS	II	P
	SUN MICROSYSTEMS STOCK	C	DIVIDENDS; I		P
	TEXACO INC STOCK	C	DIVIDENDS	III	P/S
	INTERLEXICO GROUP COS INC STOCK	D	DIVIDENDS	II	P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHNNY ISURSON

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	JOHNSON & JOHNSON STOCK				X									X									X									P
	LUCENT TECHNOLOGIES STOCK				X									X								X										P
	MCI WORLDCOM STOCK						X							X							X											P
	SOUTHWEST AIRLINES STOCK				X									X								X										P
	SUNTRUST BANKS STOCK				X									X									X									
	SUNTRUST TAX FREE FUND								X							X										X						
	ALLSTATE CORP STOCK					X								X											X							S
	AMERICAN INT'L GROUP STOCK						X							X											X							
	AMGEN INC STOCK						X							X							X											
	BANK AMERICA STOCK					X								X											X							
	CHASE MANHATTAN CORP STOCK					X								X																		
	CITIGROUP INC STOCK					X								X										X								S
	COCA COLA STOCK					X								X										X								
	EAGLE BANK SHARES STOCK				X									X									X									S
	FEDERAL NATIONAL MORTGAGE ASSN STOCK					X								X										X								
	HOME DEPOT STOCK						X							X									X									P
	IBM STOCK						X							X									X									
	MERCK & CO INC STOCK				X		X							X										X								
	MICROSOFT STOCK						X							X							X											
	POST PROPERTIES STOCK				X									X										X								
	PROTECTIVE LIFE STOCK					X								X										X								
	QWEST COMMUNICATION STOCK						X							X							X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHNNY ISAKSON

Page 5 of 13

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	REGIONS FINANCIAL STOCK				X									X										X								S
	SOUTHTRUST CORP STOCK								X																		X					
	STAPLES INC STOCK						X							X																		
	WESTPOINT STEVENS INC STOCK				X									X																		S
	FIRST STERLING BANK STOCK							X						X											X							
	RIVERSIDE BANK STOCK							X						X							X											
	WACHOVIA BANK C.D.						X									X										X						
	SOUTHTRUST BK C.D.						X									X										X						
	SUNTRUST BANK C.D.						X									X										X						
	MASS MUTUAL CASH VALUE						X							X		X					X											
	MONY INS. CASH VALUE				X									X		X					X											
	INDIANAPOLIS LIFE CASH VALUE				X									X		X					X											
	LINCOLN LIFE CASH VALUE				X									X		X					X											
	STRICO TIDE L.P. OIL & GAS				X												X			ROYALTY				X								
	STRICO BRITIAN L.P. OIL & GAS				X											X	X			"				X								
	KMI L.P. OIL & GAS				X											X	X			"					X							
	STRICO CHEETAH L.P. OIL & GAS				X											X	X			"				X								
	STRICO OUTPUT L.P. OIL & GAS				X											X	X			"				X								
	15 LOTS CHEROKEE OVERLOOK CHEROKEE S.P.						X										X												X			
	1/2 INTEREST 54 ACRES DOUGLAS COUNTY					X											X				X											
	SEADUNES TIMESHARE HILTON HEAD S.C.				X												X				X											
	50 1/4 ACRES CHEROKEE COUNTY				X												X				X											

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2272

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHNNY ISAKSEN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	1032 PRESSNAVON RD BARROW COUNTY						X														X											
	807 UNIVERSITY TOWERS CONDO ATHENS GA				X										X											X						
	415 LLC 8 CONDO'S ATHENS GA						X								X											X						
	4 ACRES HWY 140 CHEROKEE COUNTY						X										X				X											
	SMITH BARNEY APPRECIATION FUND					X								X			X							X								
	PERMIT LLC						X								X	X	X				X											P
	BIM STIC PRIME PORTFOLIO				X											X								X								

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SCHEDULE IV — TRANSACTIONS

Name JOHNNY ISAKSON | Page 2 of 13

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	CHEROKEE OVERLOOK LAND		X		2-24-99		X								
	" " "		X		3-3-99		X								
	" " "		X		3-5-99		X								
	" " "		X		4-22-99		X								
	" " "		X		6-3-99		X								
	" " "		X		7-12-99		X								
	" " "		X		7-12-99		X								
	" " "		X		10-28-99			X							
	" " "		X		8-24-99		X								
	" " "		X		12-27-99		X								
	CISCO SYSTEMS STOCK	X			12-20-99	X									
	EMC CORP MASS STOCK	X			12-20-99		X								
	LUCENT TECHNOLOGIES "	X			12-20-99		X								
	MCI WORLDCOM "	X			12-20-99		X								
	SUN MICROSYSTEMS "	X			12-20-99	X									
	BJ SERVICES "		X		1-13-99	X									

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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SCHEDULE IV — TRANSACTIONS

Name JOHNNY ISAKSON | Page 2 of 3

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	COMPAQ Computer Corp STOCK		X		3-26-99	X									
	BJ SERVICES CO STOCK		X		3-26-99	X									
	Media One Group STOCK		X		3-26-99	X									
	OMNICOM Group STOCK		X		3-26-99	X									
	U.S. TREASURY NOTE		X		1-15-99		X								
	DELTA AIRLINES STOCK	X			1-13-99		X								
	GATEWAY 2000 INC STOCK	X			1-26-99	X									
	GATEWAY 2000 INC STOCK		X		3-26-99	X									
	AMERICAN EXPRESS STOCK		X		5-3-99	X									
	DELTA AIR LINES STOCK		X		5-11-99	X									
	TEXACO INC STOCK		X		5-13-99	X									
	ALABAMA POWER STOCK	X			5-26-99		X								
	DELTA AIRLINES STOCK		X		12-20-99	X									
	SHERWIN WILLIAMS STOCK		X		12-20-99	X									
	~~EARL CLAP MASS~~ COLGATE CO STOCK	X			12-20-99		X								
	GILLETTE CO. STOCK	X			12-20-99		X								

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SCHEDULE IV — TRANSACTIONS

Name JOHNNY ISAKSON | Page 8 of 13

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	GENERAL ELECTRIC STOCK	X			12-20-99		X								
	HOME DEPOT STOCK	X			12-20-99	X									
	INTERPUBLIC GROUP STOCK	X			12-20-99		X								
	JOHNSON & JOHNSON STOCK	X			12-20-99		X								
	SOUTHWEST AIRLINES STOCK	X			12-20-99		X								
	SYSCO CORP STOCK	X			12-20-99		X								
	ABBOTT LABS STOCK		X		3-9-99 5-4-99		X								
	ALLSTATE CORP STOCK		X		12-20-99	X									
	AMBRESCO INC STOCK		X		4-5-99	X									
	AT HOME CORP STOCK	X			1-12-99	X									
	" " " STOCK		X		10-27-99		X								
	BLOUNT INTL INC STOCK		X		8-27-99			X							
	CAMPBELL SOUP STOCK		X		1-12-99		X								
	CITIGROUP INC STOCK		X		1-15-99 2-8-99		X								
	EAGLE BANK SHARES STOCK		X		7-24-99	X									
	ERICSSON LM TEL STOCK		X		3-9-99		X								

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SCHEDULE IV — TRANSACTIONS

Name JOHNNY ISAKSON Page 10 of 13

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	REGIONS FINANCIAL STOCK		X		7-20-99	X									
	STRYKER CORP STOCK		X		3-5-99	X									
	WESTPOINT STEVENS STOCK		X		10-27-99	X									
	FEDERAL HOME LOAN MTG STOCK	X			1-13-99	X									
	STI CLASSIC FUND STOCK		X		12-1-99			X							
	SUNTRUST PERSONAL EQUITY INCOME FUND		X		12-3-99					X					
	PERMIT LLC EQUITY	X			8-1-99				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	WACHOVIA BANK	MORTGAGE 5074 HAMPTON FARMS DR		X								
	SYNOVUS MORTGAGE CORP	"			X							
	SOUTHTRUST BANK	MORTGAGE, CHEROKEE OVERLOOK			X							
	ROBINSON HUMPHREY	MARGIN ACCOUNT			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	CHINA CLAY PRODUCERS	11-15-99	ATLANTA, GA - HILTON HEAD S.C. - ATLANTA GA	N	N	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
CEO, BOARD MEMBER	FAIRGREEN CAPITAL L.P. - RESIGNED AS CEO 3-9-99
DIRECTOR	RIVERSIDE BANK - RESIGNED AS DIRECTOR MARCH 1999
ADVISORY DIRECTOR	SUNTRUST BANK - RESIGNED MARCH 1999
DIRECTOR	FIRST MULTIPLE LISTING SERVICE - RESIGNED MARCH 1999
TRUSTEE	KENNESAW STATE UNIVERSITY
BOARD CHAIRMAN	THE GEORGIAN CLUB
DIRECTOR	THE REALTY ALLIANCE - RESIGNED - APRIL 1999
BOARD MEMBER	TRUST FOR PUBLIC LAND
BOARD MEMBER	GEORGIA CHAMBER OF COMMERCE
BOARD MEMBER	ATLANTA CHAMBER OF COMMERCE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
12-18-98	FAIRGREEN CAPITAL AND JOHNNY ISAKSON	PAYMENT FOR PERFORMANCE BONUS OVER TIME
11-16-95	STATE OF GA HEALTH BENEFIT PLAN AND JOHNNY ISAKSON	UPON RETIREMENT AFTER 8 OR MORE YEARS AS MEMBER OF THE GENERAL ASSEMBLY MAY CONTINUE AND PAY COST OF HEALTH INS.
12-31-98	FAIRGREEN CAPITAL AND JOHNNY ISAKSON	MAINTAIN AND PAY MEDICAL INS.

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

2280

JOHNNY ISAKSON
8TH DISTRICT, GEORGIA

WASHINGTON OFFICE:
2428 RAYBURN BUILDING
WASHINGTON, DC 20515-1006
(202) 225-4501

Congress of the United States
House of Representatives
Washington, DC 20515–1006

May 25, 1999

HAND DELIVERED

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 11 AM 10: 15
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

Mr. Jeff Trandahl
Clerk of the House of Representatives
Legislative Resource Center
B106 Cannon HOB
Washington, DC 20515

Dear Mr. Trandahl:

Pursuant to the rules of the House, I filed my Financial Disclosure Statement (Form A) on May 17th for the year 1998. On December 31, 1998, I filed the Financial Disclosure Statement (Form B) required for candidates.

Schedule 1 differed between Form B and Form A. When Form B was filed I estimated income numbers, due to the unavailability of all necessary data, and when Form A was filed I used the exact numbers from my tax filing. The only major difference between the two was the income from Northside Realty (Fairgreen Capital). The reason for the difference was that I included on Form B my estimate of the incentive compensation I had earned but would not be paid until the end of the first quarter of 1999. The incentive was paid at the end of the first quarter of 1999 and will be reported on the filing for 1999.

The difference on First Multiple Listing Service, SunTrust Bank, Riverside Bank and Cest Moi amounts was only because Form B used estimates, and Form A used W-2 or 1099 numbers. The only other difference between the two filings was on Schedule III. On Form A I reported B.J.Services stock which did not appear on Form B filed at the end of last year. The reason for it not appearing on Form B was because the purchase was made by a revocable trust managed by Suntrust Banks which only reports purchases and sales after the end of a quarter and I did not receive the information until January 31, 1999.

If there are any questions please do not hesitate to call my office.

Sincerely,

Johnny Isakson

PRINTED ON RECYCLED PAPER

JOE KNOLLENBERG, MICHIGAN
DAVE CAMP, MICHIGAN
ROB PORTMAN, OHIO

ROBERT L. WALKER,
CHIEF COUNSEL/STAFF DIRECTOR

JOHN W. LAMPMANN,
ASSISTANT TO THE CHAIRMAN

SAM L. SCHWARTZ,
COUNSEL TO THE RANKING
MINORITY MEMBER

ONE HUNDRED SIXTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

RANKING MINORITY MEMBER
MARTIN OLAV SABO, MINNESOTA
ED PASTOR, ARIZONA
CHAKA FATTAH, PENNSYLVANIA
ZOE LOFGREN, CALIFORNIA

SUITE H-2, THE CAPITOL
(202) 225-7103

March 26, 1999

Mr. Benjamin L. Ginsberg
Patton Boggs, LLP
2550 M Street, NW
Washington, DC 20037-1350

Dear Mr. Ginsberg:

This responds to your letter of February 19, 1999 in behalf of Mr. Johnny Isakson, who was elected to the House in a special election on February 23, 1999. Your letter inquires whether Representative Isakson may accept certain payments from Fairgreen Capital LP and Stricklin Capital, Inc., specifically: (1) bonus payments voted by the Stricklin board on December 24, 1998, and (2) consulting payments from Fairgreen Capital for continuing advice to the company.

The background on this matter, as set forth in your letter, is as follows. Representative Isakson is one of thirteen partners in Stricklin, which is a subchapter S corporation. Stricklin is the sole general partner in Fairgreen Capital, which is a capital-intensive, diversified real estate limited partnership. Both Stricklin and Fairgreen were established in 1991. Stricklin's sole asset is its partnership interest in Fairgreen Capital.

Fairgreen has nine separate divisions that own and operate its assets, and your letter states that each division functions as a separate business unit: Finance and Administration, Fairgreen Development, Fairgreen Mortgage Company, LLC, Northside Realty, Builder Developer Services, Northside Insurance, Fairgreen Property Management, Polo Golf and Country Club, and Big Creek Utility Company, Inc. Attached to your letter was a list of real estate owned by Fairgreen Capital as of December 31, 1998.

In 1991 Stricklin and Fairgreen purchased Northside Realty, for which Mr. Isakson had worked in various capacities since May 1967, including as president since 1979. Prior to his election to the House, he had been serving as president of Stricklin and chief executive officer of Fairgreen Capital. He has been involved in Fairgreen's enterprises for the past 31 years. He receives either capital gains or ordinary income from Stricklin as a return on his investment, and he has received a salary plus bonus from Fairgreen for his services as chief executive officer. However, your letter also states that he will resign from Stricklin and Fairgreen upon his election to the House, and that he will no longer serve as a director or officer of either the company or the partnership, and will engage in no active selling.

Bonus Payments. With regard to the bonus payments, your letter represents as follows. In calendar year 1998 Fairgreen enjoyed a year of unprecedented profits. While the partnership had projected a profit of $5.7 million for the year, the actual profit realized was more than $10 million. Based on this performance, the Stricklin board voted on December 24, 1998 to award Mr. Isakson a bonus of $460,000 for work performed in 1998. For purposes of its own cash flow and for Mr. Isakson's tax payments, the board would like to pay him his normal salary plus a bonus of $60,000 on or before March 15, 1999. The remaining $400,000 bonus would be paid to him at a quarterly rate of $20,000 beginning on July 1, 1999 for a period of five years.

Your letter also represents that the parties believe that Stricklin and Fairgreen are legally obligated to make these payments to Mr. Isakson, and the board's view was that it was contractually obligated to pay this bonus to him irrespective of whether he was elected to the House. In addition, none of the payments are contingent upon the performance of any future services by him or on the future performance of Fairgreen or Stricklin.

Based on the representations made in your letter, it appears that the bonus payments will be bona fide payments for past services, and that hence his acceptance of those payments is permissible under the rules and standards of conduct of the House. In addition, the bonus payments described in your letter will not count against the outside earned income limitation applicable to Representative Isakson under clause 1 of House Rule 26, in that among the items excepted from the limitation is "any compensation derived by a Member . . . for personal services actually rendered . . . before he became a Member" (clause 4(d)(1)(B) of House Rule 26).

The bonus payments will have to be reported as earned income on Schedule I of each annual Financial Disclosure Statement that Representative Isakson files for a year in which he received such a payment. This disclosure should be accompanied by a notation stating that the payment was for services rendered prior to his election to the House.

Consulting Payments. The Ethics Reform Act of 1989 imposed a number of restrictions on the outside earned income of Members and senior staff of the House and Senate, as well as on senior officials in the other branches of government. One of these restrictions is a prohibition on their receiving "compensation for practicing a profession which involves a fiduciary relationship." 5 U.S.C. app. 4 §502(a)(3); House Rule 26, cl. 2(c). The report of the 1989 Bipartisan Task Force on Ethics, which authored those provisions, states the following with regard to their intended scope:

> The task force intends the ban to reach, for example, services such as legal, real estate, **consulting and advising**, insurance, medicine, architecture, or financial.

Report of the Bipartisan Task Force on Ethics on H.R.3660, 101st Cong., 1st Sess., at p. 16. (Emphasis added.)

In its February 23, 1998 Advisory Memorandum on "Outside Earned Income Restrictions on Members and Staff," the Committee stated that, in determining whether professional services involve a prohibited fiduciary relationship, it would henceforth rely on the above-quoted list of professions set forth in the 1989 Task Force report, as well as the admonition in the report that, "[T]he task force intends that the term fiduciary not be applied in a narrow, technical sense and wants to ensure that honoraria not reemerge in various kinds of professional fees from outside interests."

In light of its previously announced determination that consulting and advising are among the professional services the practice of which for compensation by Members and senior staff is prohibited, the Committee advises that Representative Isakson's proposed consulting arrangement with Fairgreen would be prohibited.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Lamar Smith
Chairman

Howard L. Berman
Ranking Minority Member

ATTACHMENT

02/17/99

LIST OF REAL ESTATE OWNED BY FAIRGREEN CAPITAL, LP
AS OF DECEMBER 31, 1998
FILE - 98LANDJI

	NAME	TYPE	ADDRESS	CITY
1	NORTHSIDE TOWER	COMMERCIAL BUILDING	6065 ROSWELL ROAD	ATLANTA
2	ROSWELL OFFICE PARK	THREE COMMERCIAL BUILDINGS	620 HOLCOMB BRIDGE ROAD	ROSWELL
3	NORTHSIDE INSURANCE BUILDING	COMMERCIAL BUILDING	11040 CRABAPPLE ROAD	ROSWELL
4	COMMERCIAL BUILDING	COMMERCIAL BUILDING	45 CROSSVILLE ROAD	ROSWELL
5	POLO GOLF AND COUNTRY CLUB	COUNRTY CLUB	6300 POLO DRIVE	CUMMING
6	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	5998 LAKE FOREST DRIVE	ATLANTA
7	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	10915 HIGHWAY 9	ALPHARETTA
8	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	1636 MOUNT VERNON ROAD	ATLANTA
9	~~NORTHSIDE REALTY OFFICE~~ 2.Y DEVL	COMMERCIAL ~~BUILDING~~ LAND	200 SOUTH MAIN STREET	ALPHARETTA
10	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	483 INDIAN TRAIL ROAD	LILBURN
11	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	4177 ROSWELL ROAD	ATLANTA
12	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	1320 WEST PACES FERRY ROAD	ATLANTA
13	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	2675 MAIN STREET WEST	SNELLVILLE
14	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	900 WHITLOCK AVENUE	MARIETTA
15	NORTHSIDE REALTY OFFICE	COMMERCIAL BUILDING	2601 SANDY PLAINS ROAD	MARIETTA
16	POLO SUBDIVISION	95 LOTS AND RAW ACREAGE	FORSYTH COUNTY	CUMMING
17	WILD TIMBER SUBDIVISION	41 LOTS AND RAW ACREAGE	GWINNETT COUNTY	SUGAR HILL
18	EDENWILDE SUBDIVISION	13 LOTS AND RAW ACREAGE	FULTON COUNTY	ROSWELL
19	GRAND VERIDIAN SUBDIVISION	4 LOTS AND RAW ACREAGE	FULTON COUNTY	ROSWELL
20	ONE HALF ACRE	LOT	1585 WEST WESLEY ROAD	ATLANTA
21	3 ACRES	UNDEVELOPED LAND	HEMBREE ROAD	ROSWELL
22	2 ACRES	UNDEVELOPED LAND	HENDERSON VILLAGE	ROSWELL
23	STRIP OF LAND	UNDEVELOPED LAND	MANSELL ROAD	ROSWELL
24	STRIP OF LAND	UNDEVELOPED LAND	ROCKBRIDGE	DEKALB
25	6 ACRES	UNDEVELOPED LAND	CRABAPPLE ROAD	ROSWELL
26	16 ACRES	UNDEVELOPED LAND	HARDSCABBLE ROAD	ROSWELL
27	WILDCTMAER SUBDIVISION	DEVELOPED LOTS AND RAW ACREAGE	RAMEY ROAD	GWINETT

10:40 AM

2285

JOHNNY ISAKSON
6TH DISTRICT, GEORGIA

EDUCATION AND THE WORKFORCE
WORKFORCE PROTECTIONS
POSTSECONDARY EDUCATION, TRAINING AND LIFE-LONG LEARNING

TRANSPORTATION AND INFRASTRUCTURE
AVIATION
OVERSIGHT INVESTIGATIONS AND EMERGENCY MANAGEMENT

Congress of the United States
House of Representatives
Washington, DC 20515–1006

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6000 LAKE FORREST DRIVE
SUITE 110
ATLANTA, GA 30328
(404) 252–5239
FAX: (404) 303–1260

http://www.house.gov/isakson

HAND DELIVERED

00 JUN -9 AM 10:54

(3)

MC

June 8, 2000

Mr. Jeff Trandahl
Clerk of the House of Representatives
Legislative Resource Center
Washington, D.C. 20515

Dear Sir,

Enclosed please find new copies of pages six and ten of my 1999 Financial Disclosure Statement. Please insert these pages and replace the existing pages six and ten.

On the new page six I added stocks which were sold prior to the end of 1999 and were no longer assets as of December 31. I listed the sales on Schedule IV, but was unaware they also had to be listed on Schedule III.

On the new page ten I added Chase Manhatten Corp as a new purchase, because it was unintentionally left out on the original filing.

Thank you for inserting these two replacements.

Sincerely,

Johnny Isakson

PRINTED ON RECYCLED PAPER

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHNNY ISAKSEN

Page 6 of 13

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	103.2 PRESSNAVEN RD RAGAN COUNTY						X														X											
	807 UNIVERSITY TOWERS CONDO ATHENS GA				X										X											X						
	VIS LLC 8 CONDO'S ATHENS GA						X								X											X						
	VACRES ANY 146 CHEROKEE COUNTY						X										X				X											
	SMITH BARNEY APPRECIATION FUND					X								X			X							X								
	PERMIT LLC						X								X	X	X				X											P
	AIM STIC PRIME PORTFOLIO				X											X								X								
	US TREASURY NOTES	X														X																S
	SHERWIN WILLIAMS STOCK	X												X			X					X										S
	STI CLASSIC FUNDS	X												X			X							X								S
	AMORESCO INC STOCK	X												X			X				X											S
	BLOUNT INT'L INC STOCK	X												X			X										X					S
	CAMPBELL SOUP STOCK	X												X			X									X						S
	ERICSSON L.M. TEL STOCK	X												X			X									X						S
	STRYKER CORP STOCK	X												X			X									X						S
	BJ'S CLUBS STOCK	X												X			X									X						P/S

This page may be copied if more space is required.

Name JOHNNY ISAKSON Page 12 of 13

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	REGIONS FINANCIAL STOCK		X		7-20-99	X									
	STRYKER CORP STOCK		X		3-9-99	X									
	WESTPOINT STEVENS STOCK		X		10-27-99	X									
	FEDERAL HOME LOAN MTG STOCK	X			1-13-99	X									
	STI CLASSIC FUND STOCK		X		12-1-99			X							
	SUNTRUST PERSONAL EQUITY INCOME FUND		X		12-3-99					X					
	PERMIT LLC EQUITY	X			8-1-99				X						
	CHASE MANHATTEN CORP STOCK	X			1-15-99			X							

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2288

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 16 AM 10: 31
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Congressman Ernest Istook

5th District of Oklahoma

2404 Rayburn House Office Building, Washington, D.C. 20515 (202) 225-2132

15 EDT

May ~~17~~, 2000

MC

(10)

Mr. Jeff Trandahl, Clerk of the House
Office of the Clerk
H-154 of the Capitol
Washington, DC 20515

HAND DELIVERED

Re: Annual Financial Disclosure

Dear Mr. Trandahl:

Enclosed is my annual financial disclosure statement, for the year ended 12/31/99.

Included in the statement is a reference to the John L. Bills Family Limited Partnership, which is a family limited partnership created by my father-in-law, John L. Bills, as part of his estate planning. Its assets consist of investments in certain mutual funds. Although I was aware that the trust had been created in 1998, I was unaware until recently (during 2000, as part of advance planning for this annual report) that any assets had been placed into that partnership prior to 1/1/1999. I learned recently that assets had in fact been placed into the partnership on Dec. 31, 1998—which therefore should have been included in my disclosure report of one year ago. The general and managing partner of the partnership is John L. Bills. My interest is solely as a limited partners with no managing or investing control. Additionally, my wife is also a limited partner, with a separate interest which matches mine.

As of 12/31/1998, the information I have now received indicates that my proportionate interest in the partnership's assets was an undivided interest in the partnership's mutual fund holdings through broker Charles Schwab, which translates into the following (equitable) personal holding via the partnership in these mutual funds:

MFOCX	$1,974
WOGSX	2,111
PAAFX	1,865
RVOCX	2,265
RYNVX	2,183
Total	10,398

On or about June 17, 1999, my father-in-law changed the mix of mutual funds, with the result that, as of 12/31/1999, I am advised that my (equitable) personal holding via the partnership translates into the following:

JP Morgan Equity Fund	$1,135.88
Bankers Trust Equity Index Fund	1,847.68
Janus Growth LT Fund	3,618.56
Alliance Capital Aggressive Equity Fund	1,296.52
Salomon Brothers Large Cap Value Fund	2,204.67
Lazard Mid Cap Value Fund	2,162.87
Money Market	583.75
Total	$12,849.93

Both as of 12/31/98 and as of 12/31/99, my wife has a separate interest as a separate limited partner, with an undivided interest of her own which is equal to mine, as set forth above. (Thus, our combined equitable holdings are double the amounts set forth above.)

I recognize this information is not in the format in which you wish to receive it, but I lack sufficient information to be sure I could correctly provide it in that format, so I have conveyed it in this letter in the form in which I have received the information from my father-in-law.

I regret I was unaware of the circumstances (that the partnership had acquired any assets) at the time of my disclosure report last year.

Sincerely,

ERNEST J. ISTOOK, JR.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CHIEF CLERK'S RECORDS CENTER
00 MAY 16 AM 10: 30
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

Ernest James Istook, Jr. (Full Name)

6113 Inland (Mailing Address)

Warr Acres, OK 73132

Home: (405) 722-3366
OK ofc.: (405) 942-3636
DC ofc.: (202) 225-2132
Daytime Telephone

HAND DELIVERED (Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives — State: Oklahoma District: 5th	☐ Officer or Employee — Employing Office:	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ernest J. Istook Jr.	5/15/2000

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Columbia Presbyterian Hospital, 700 NE 13th, OKC, OK 73104	Spouse's Income as Registered Nurse	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name: ISTOOK, Ernest James, Jr.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income								Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								P
DC, Examples:	Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
	Former Law Office Furnishings 5700 N. Grand 46113 Inland, OK			X																	X											
	Istook & Assoc., P.C., stock			X																	X											
JT	First Fidelity Bank Wheer Acres, OK			X																		X										
JT	Home - 6113 Inland Wheer Acres, OK						X														X											
	IRA Account - Sandler Growth Fund, Boston, MA			X																			X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: ISTOOK, Ernest James, Jr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction (P, S, E)
	The following are held via self-directed retirement plan of Istook & Associates, P.C.:				
	- Judy McKinney, Bethany, OK. Prom. Note & Mtg. - cancelled for				
	paid in lieu of foreclosure	A: None	INTEREST; CAPITAL GAINS	VI: $5,001 – $15,000	E (Lien)
	- Keeling Mortgage foreclosed via litigation (Deputy Sheriff, OK)	A: None	Other Type of Income: Loss	I: None	E (foreclosure)
	- Ernest & Judy Istook, Warr Acres, OK Prom. Note & Mtg.	E: $15,000 – $100,000		I: None	
	- 20th Century Ultra Fund, Kansas City, Mo.	D: $50,001 – $100,000	DIVIDENDS; CAPITAL GAINS	VI: $5,001 – $15,000	
	- American Century Equity Growth Fund, Kansas City, Mo.	C: $1,001 – $15,000	DIVIDENDS; CAPITAL GAINS	IV: $1,001 – $2,500	
	- American Century Income & Growth Fund Kansas City, Mo.	C: $1,001 – $15,000	DIVIDENDS; CAPITAL GAINS	IV: $1,001 – $2,500	
	- American Century Prime Money (formerly Benham) Market Fund, Kansas City, Mo.	C: $1,001 – $15,000	INTEREST	II: $1 – $200	
	Federal Employees Thrift Savings Plan	E: $15,000 – $100,000	DIVIDENDS; CAPITAL GAINS	VII: $15,001 – $50,000	
	John L. Bills Family Limited Partnership	C: $1,001 – $15,000	DIVIDENDS; CAPITAL GAINS	V: $2,501 – $5,000	
SP	John L. Bills Family Limited Partnership	C: $1,001 – $15,000	DIVIDENDS; CAPITAL GAINS	V: $2,501 – $5,000	

See reverse side

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SCHEDULE IV — TRANSACTIONS

Name: ISTOOK, Ernest James, Jr.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example*	Mega Corporation Common Stock	X			10-12-99		X								
	6905 NW 53rd, Bethany, OK (From McKinney deed in lieu of foreclosure) - Contract for Deed back to Jud, McKinney, with financing by First Fidelity Bank (following deed in lieu of foreclosure), via IRA retirement plan			X		9-1-99		X								
	Transactions via Prime Money Market Fund															
	Legal Fees on Keeling foreclosure			X		2-16-99	X									
	Deposit Distribution from Keeling bankruptcy trustee		X			3-4-99	X									
	Transfer to Ultra Fund				X	3-18-99	X									
	Transfer to Ultra Fund				X	3-22-99	X									
	Transfer to Ultra Fund				X	3-23-99	X									
	Bank proceeds financing (McKinney) contract for Deed via mortgage		X			9-9-99										
	To Equity Growth Fund		X			" "	X									
	To Ultra Fund		X			" "	X									
	To Income & Growth Fund		X			" "	X									
	To Money Market		X			" "	X									
	Transfer to Ultra Fund				X	10-18-99	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	First USA Bank Wilmington, DE	Revolving Account	X									
JT	UNIPAC, Denver, CO	College Loans	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Page 7 of 8
ISTOOK, Ernest James, Jr.	

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Heritage Foundation	Aug. 9-17	Oklahoma-Taiwan-China-Oklahoma	Y	Y	Y (Spouse)	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President & Director	Istook & Associates, P.C., Oklahoma City, OK

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

THE LAWYER'S SOURCE CENTER
00 MAY 15 PM 5:28
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(9)
HAND DELIVERED
(Office Use Only)

Jackson, Jesse Jr.
(Full Name)

313 Canon Building
Washington, DC 20515
(Mailing Address)

202-225-0773
Daytime Telephone

Filer Status	[X] Member of the U S House of Representatives	State Illinois District 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jesse Jackson Jr.	05/15/00

2299

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Spouse - US Export-Import Bank	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

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Name	Page ___ of ___
Jackson, Jesse Jr.	3 8

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	The Nation Magazine	Article	March 15	$150

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	Putnam Asst Alloc (SEPIRA)						x								X			X								x							
	Putnam Capital Apprec (SEP)						X								X			X						X									
	Putnam Equity Income (SEPC			X											X			X					X										
	MFS Research (IRA)					X									X			X					X										
	MFS Cap Opps (IRA)						X								X			X								X							
	Oppen Quest Opp Val (IRA)			X														X					X										

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jackson, Jesse Jr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Putnam Asst Alloc Gth (SEPO			X										X			X						X									
SP	Opp Qst Opp Value (IRA)		X														X					X										
SP	John Hck Small Cap Grth (SEP)			X																	X											
SP	American Invst Co of Amer (SEPO				X									X			X								X							

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SCHEDULE IV — TRANSACTIONS

Name: Jackson, Jesse Jr.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Putnam Asst Alloc Grth (SEPIRA)		X		4-13-99		X								
	Oppen Quest Opp Value (ROTH)			X	4-13-99	X									
SP	Oppen Quest Opp Value (ROtH)			X	4-13-99	X									
SP	John Hancock Special Equities (SEP)			X	4-13-99	X									

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Name Jackson, Jesse Jr

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	First Union Mortgage - Raleigh,NC	Mortgage of effcy condo 240 M St, SW Wash, DC			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	Page 7b of 8
Jackson, Jesse Jr.	

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Turner Broadcasting System	Jan. 10-12	D.C.-Atlanta-D.C.	Y	Y	Y	N
	Rainbow/PUSH coalition	Jan. 14-16	D.C.-N.Y.C.-D.C.	Y	N	Y	N
	Citizens for Participation in Political Action	April 24-5	D.C.-Cambridge-D.C.	Y	Y	N	N
	Lancelot Owens Scholarship Fdn.	May 8-9	D.C.-Newark-D.C.	Y	Y	N	N
	Brown Foundation	May 16-17	Chicago-Topekna-D.C.	Y	Y	N	N
	Do Something	Aug.19-22	D.C.-Salt Lake City-Chicago	Y	Y	N	N
	SBC	Aug.27-28	Chicago-San Francisco-Chicago	Y	Y	N	N
	The Epiphany School	Oct.29-30	D.C.-Boston-D.C.	Y	Y	N	N
	NAACP	Nov.12-13	D.C.-Minneapolis-Chicago	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Chicago Theological Seminary

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members officers and employees

00 JUN 15 PM 6:04

Sheila Jackson Lee
(Full Name)

4428 N. Roseneath, Houston, Texas 77021
(Mailing Address) (Daytime Telephone) (202) 225-3816

HAND DELIVERED
(Office Use Only)

Filer Status	☑ Member of the U S House of Representatives	State Texas District 18th Dist	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Sheila Jackson Lee	June 15, 2000

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	University of Houston (State of Texas Employer)	Spouse Salary	

For payments to charity in lieu of honoraria, use Schedule II.

Name Sheila Jackson Lee | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	SP Mega Corp. Stock	X	DIVIDENDS: X	IV $1,001 – $2,500: X	P
DC. *Examples:*	Simon & Schuster	Indefinite	Other Type of Income: Royalties	IX $100,001 – $1,000,000: X	
JT	1st Bank of Paducah, KY accounts	F $100,001 – $250,000: X	INTEREST: X	VI $5,001 – $15,000: X	
Sp	First Investors Fund For Income	C $15,001 – $50,000: X	DIVIDENDS: X	III $201 – $1,000: X	
Sp	Metropolitan Life	G $250,001 – $500,000: X	INTEREST: N/A	IV $1,001 – $2,500: N/A	
Sp	Oppenheimer Fund	D $15,001 – $50,000: X	INTEREST: N/A	IV $1,001 – $2,500: N/A	
Sp	457 F Account	D $15,001 – $50,000: X	INTEREST: N/A	IV $1,001 – $2,500: N/A	
	City of Houston Pension	not established	INTEREST: N/A	IV $1,001 – $2,500: N/A	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Sheila Jackson Lee

Page 4 of 6

BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
SP, DC, JT	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
DC Bellfort SDA Church			X													N/A						N/A								
DC Bellfort SDA Church			X													N/A						N/A								
Occidental Petro - Stock		X											X							X										
Wright Patman Credit Union			X												X							X								
DC Bank of America			X												X															
United Energy		X													X						X									
Resources Credit Union																														
Credit Union Elect		X													X						X									
Capital Credit Union \ Employees																														
Unity Bank			X												X							X								
Bank of America			X												X							X								
Sterling Bank			X												X							X								

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Name Sheila Jackson Lee | Page

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
The Dallas Democratic Forum	March 12	Houston - Dallas - Houston	Y	Y	N	N.
The Women of Color - Harvard	April 17	Houston - Boston - Houston	Y	Y	N	N
St. Paul U.M.C. - Texas	April 25	Houston - San Ant. - Houston		Y	N	N
Southern Law Center	May 15	Houston Baton Rouge		Y	N	N
American Bar NAACP	May 15	Baton Rouge - Arnaud ~~Houston Baton Rouge~~	Y	Y	N	N
Com. Workers of Am	June 3-5	Houston - South Padre Island	Y	Y	N	N
Inland Area United Black Women Forum	July 18	Houston - San Bernardino - San Fran	Y	Y	N	N
Women Trial Lawyer	July 18	San Francisco - Houston	Y	Y	N	N
National Bar Assoc.	July 28	Washington D.C to Philadelphia - to Washington, D.C		Y	N -	Y

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Name Sheila Jackson Lee | Page 6 of 6

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director - Spouse	Third Ward Redevelopment Corp - Houston
Vice - Chancellor	University of Houston - Houston
Director	Contemporary Arts Museum
Director	Consumer Credit Counseling
Director / Advisory Board	Spaulding for Children
Trustee	Houston Grand Opera / Advisory Board
	Oakwood College Huntsville, Alabama

Advisory Member Institute Cultural De Mexico of University of Houston School of Law
Director - Aquarium Foundation of Houston
Director Sam Houston Area Council of the Boy Scouts

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MAY 15 2000
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William Jennings Jefferson
(Full Name)

240 Cannon Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone (202) 225-6636

Filer Status: [X] Member of the U.S. House of Representatives — State Louisiana District 02 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William J. Jefferson	5/15/00

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Name	William J. Jefferson	Page 1 of 12

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
Southern University	Spouse Salary	N/A
The A Group, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name William J. Jefferson

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock						X							X										X								P
	DC Simon & Schuster		Indefinite																	Royalties									X			
	JT 1st Bank of Paducah, KY accounts							X								X										X						
See attached																																

For additional assets and unearned income, use next page.

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

ASSET AND/OR UNEARNED INCOME SOURCE	VALUE OF ASSET							TYPE OF INCOME							AMOUNT OF INCOME										TRANS
											C														
												Q													
											G	T	T												
								D	R		A	R	R												
								I	E	I	I	U	U												
								V	N	N	N	S	S												
								D	T	T	S	T	T												
	A	B	C	D	E	F	G							I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
FARMLAND -40 ACRES, LAKE PROV. LA					X				X								X								
FARMLAND -50 ACRES, LAKE PROV. LA			X						X						X										
JEFFERSON, BRYAN & JUPITER - SHS. IN CORP.							X			X				X											
ACTIVE APPAREL GROUP		X						X						X											
AMERICA ONLINE						X		X						X											P
BROADCOM CORP				X				X						X											P
C PHONE		X						X						X											
CISCO SYSTEMS						X		X						X											
GENESIS DIRECT		X						X						X											
INTERNET AMERICA			X					X						X											
MULTIPLE ZONES INTL			X					X						X											
NOKIA CORP			X					X						X											P
USA TALKS.COM		X						X						X											P
BEA SYSTEMS			X					X						X											P
BRAUN CONSULTING				X				X						X											P
BROADCOM CORP			X					X						X											P
ELCOM INTL			X					X						X											P
GENOME THER			X					X						X											P
INKTOMI			X					X						X											P
INKTOMI				X				X						X											P
INTERNEURON PHARM			X					X						X											P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

ASSET AND/OR UNEARNED INCOME SOURCE	VALUE OF ASSET							TYPE OF INCOME						AMOUNT OF INCOME											TRANS
	A	B	C	D	E	F	G	DIVD	RENT	INT	CGAINS	TRUST	QTRUST	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
FIDELITY - LO PRC STK FUND			X					X			X					X									S
VANGUARD FUND			X					X			X				X										S
UNION SAVINGS & LOAN			X							X						X									
FIDELITY SAVINGS & LOAN			X							X						X									
JEFFERSON FOR MAYOR CAMP. - LOAN REC.						X		N	O	N	E			X											
JEFFERSON INTERESTS - LOAN RECEIVABLE							X			X				X											
JEFFERSON FOR GOVERNOR - LOAN REC.					X			N	O	N	E			X											P

Name William J. Jefferson

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.	Type of Transaction			Date	Amount of Transaction									
	PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT Asset														
SP *Example:* Mega Corporation Common Stock	X			10–12–99		X								
See attached														

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SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
AMAZON.COM	X			1/5/99		X								
AMAZON.COM	X			1/11/99		X								
AMAZON.COM		X		1/15/99	X									
AMAZON.COM		X		1/19/99	X									
AMAZON.COM		X		4/8/99		X								
AMAZON.COM		X		12/3/99		X								
AMERITRADE	X			4/14/99	X									
AMERITRADE	X			4/13/99		X								
AMERITRADE	X			4/5/99	X									
AMERITRADE		X		5/3/99		X								
AMERITRADE		X		12/21/99	X									
AMERITRADE		X		12/21/99	X									
AOL	X			3/23/99	X									
AOL	X			3/24/99	X									
AOL	X			4/16/99	X									
AOL	X			4/28/99	X									
AOL	X			5/3/99		X								
AOL	X			12/16/99		X								
AOL		X		6/2/99		X								
AOL		X		7/29/99	X									
AOL		X		7/30/99		X								
AOL		X		12/21/99		X								
BEA SYSTEMS	X			11/17/99		X								
BEA SYSTEMS	X			12/3/99	X									
BEA SYSTEMS		X		11/29/99		X								
BRAUN CONS	X			12/27/99		X								
BROADCOM	X			4/21/99	X									
BROADCOM	X			11/30/99		X								

7/12

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
BROADCOM	X			12/23/99	X									
BROADCOM		X		4/28/99	X									
CISCO	X			7/12/99	X									
CMGI	X			1/12/99		X								
CMGI		X		3/2/99		X								
CNET	X			3/11/99		X								
CNET		X		3/22/99	X									
CNET	X			3/23/99	X									
CNET		X		3/25/99	X									
CHARTER COMM	X			11/11/99	X									
CHARTER COMM		X		12/3/99	X									
CISCO	X			5/12/99	X									
CISCO	X			7/12/99	X									
COULTER		X		1/11/99	X									
COULTER		X		1/11/99	X									
CREATIVE TECH		X		12/20/99	X									
CYTEL	X			1/14/99	X									
CYTEL	X			1/14/99	X									
CYTEL		X		1/15/99	X									
CYTEL		X		1/15/99	X									
DELL	X			3/8/99	X									
DELL		X		3/11/99	X									
DELL		X		3/12/99		X								
DELL		X		4/13/99		X								
DELL	X			4/5/99		X								
DELL	X			7/12/99	X									
DELL		X		7/29/99	X									
DURAMED	X			3/25/99	X									
DURAMED		X		3/25/99	X									

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION			DATE	AMOUNT OF TRANSACTION									
	P	S	E		B	C	D	E	F	G	H	I	J	K
DURAMED		X		6/2/99	X									
EBAY	X			3/3/99		X								
EBAY	X			3/12/99	X									
EBAY		X		3/30/99		X								
EBAY		X		3/30/99	X									
EFAX	X			3/16/99	X									
EFAX		X		4/12/99	X									
ELCOM	X			12/28/99	X									
ESOFT	X			11/17/99	X									
ESOFT		X		11/22/99	X									
EUROWEB	X			12/22/99	X									
EUROWEB		X		12/30/99	X									
ETRADE	X			1/12/99	X									
ETRADE		X		2/23/99	X									
ETRADE	X			4/14/99	X									
ETRADE	X			4/14/99	X									
ETRADE	X			4/5/99	X									
ETRADE	X			5/6/99	X									
ETRADE		X		6/16/99	X									
ETRADE		X		5/3/99	X									
ETRADE		X		5/3/99	X									
ETRADE		X		12/21/99	X									
ETRADE		X		12/30/99	X									
GENOME	X			12/20/99	X									
IMATRON	X			11/17/99	X									
IMATRON		X		12/30/99	X									
INKTOMI	X			12/3/99	X									
INKTOMI	X			12/8/99		X								
INTERNEURON	X			12/27/99	X									

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
IRVINE		X		3/29/99	X									
JUNO	X			12/21/99		X								
JUNO		X		12/23/99	X									
LATTICE	X			4/21/99	X									
LATTICE		X		6/2/99	X									
LORAL		X		11/29/99	X									
LORAL	X			11/11/99	X									
MPATH	X			4/29/99	X									
MPATH		X		12/30/99	X									
MARKETWATCH	X			1/15/99		X								
MARKETWATCH		X		1/26/99	X									
MICROSOFT		X		1/12/99	X									
MICROSOFT	X			3/29/99		X								
MICROSOFT		X		4/13/99		X								
NDBG	X			4/14/99	X									
NDBG	X			4/13/99		X								
NDBG		X		7/29/99	X									
NOKIA	X			11/30/99	X									
NOVELLUS	X			12/20/99		X								
ONEMAIN		X		3/25/99	X									
ONEMAIN	X			3/25/99	X									
ORACLE		X		1/6/99	X									
PRICELINE	X			3/30/99	X									
PRICELINE		X		3/30/99	X									
PRICELINE		X		4/5/99	X									
QUALCOMM	X			12/30/99		X								
RED HAT	X			11/29/99		X								
RED HAT		X		12/27/99		X								
RED HAT		X		12/30/99		X								

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
RICHARDSON ELEC	X			12/22/99	X									
SCIENTIFIC ATLANTA	X			11/30/99	X									
SCIENTIFIC ATLANTA		X		12/21/99	X									
SKYMALL		X		1/11/99	X									
SKYMALL		X		1/19/99	X									
SPYGLASS	X			4/8/99	X									
SPYGLASS		X		4/9/99	X									
SUNGLASSHUT	X			1/14/99	X									
SUNGLASSHUT		X		1/15/99	X									
TELTRONICS		X		1/19/99	X									
UBID	X			1/12/99	X									
UBID		X		1/19/99	X									
USA TALKS		X		1/26/99	X									
USATALKS	X			1/14/99	X									
VALUEVISION		X		1/11/99	X									
XOOM	X			4/13/99		X								
XOOM		X		11/29/99		X								
YAHOO	X			2/23/99	X									
YAHOO	X			3/12/99		X								
YAHOO		X		4/14/99		X								
YAHOO		X		4/16/99	X									
YAHOO	X			4/8/99		X								
YAHOO		X		11/19/99		X								
FIDELITY - LO PRC STK		X		12/7/99	X									
FIDELITY - LO PRC STK		X		12/7/99	X									
VANGUARD FUND		X		12/8/99	X									
JEFFERSON FOR GOVERNOR - LOAN REC.	X			10/20/99			X							

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wright Patman Credit Union	Secured/Automobile	X									
	E*Trade Securities, Palo Alto, CA	Margin Account				X						
	Liberty Bank, New Orleans, LA	Unsecured		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None during reporting period.	
	See 1990 Disclosure Form for prior	
	agreement.	

GPO 2000 52-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FORM A
For use by Members, officers, and employees

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

RECEIVED
CENTER
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HAND DELIVERED
(Office Use Only)
13

William Jennings Jefferson
(Full Name)

240 Cannon Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone (202) 225-6636

Filer Status	[X] Member of the U.S. House of Representatives — State: Louisiana District: 02	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
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III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
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V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Wm. J. Jefferson	5/15/00

Name	William J. Jefferson	Page 1 of 12

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Southern University	Spouse Salary	N/A
	The A Group, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name William J. Jefferson

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP	Mega Corp. Stock					X								X										X								P
		Simon & Schuster		Indefinite																	Royalties									X			
		1st Bank of Paducah, KY accounts						X									X										X						
	See attached																																

For additional assets and unearned income, use next page.

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

ASSET AND/OR UNEARNED INCOME SOURCE	VALUE OF ASSET							TYPE OF INCOME							AMOUNT OF INCOME											TRANS
												C														
														Q												
												G	T	T												
								D	R			A	R	R												
								I	E	I		I	U	U												
								V	N	N		N	S	S												
								D	T	T		S	T	T												
	A	B	C	D	E	F	G								I	II	III	IV	V	VI	VII	VIII	IX	X	XI	
FARMLAND -40 ACRES, LAKE PROV. LA					X				X									X								
FARMLAND -50 ACRES, LAKE PROV. LA			X						X							X										
JEFFERSON, BRYAN & JUPITER - SHS. IN CORP.							X			X					X											
ACTIVE APPAREL GROUP		X						X							X											
AMERICA ONLINE						X		X							X											P
BROADCOM CORP				X				X							X											P
C PHONE		X						X							X											
CISCO SYSTEMS						X		X							X											
GENESIS DIRECT		X						X							X											
INTERNET AMERICA			X					X							X											
MULTIPLE ZONES INTL			X					X							X											
NOKIA CORP			X					X							X											P
USA TALKS.COM		X						X							X											P
BEA SYSTEMS			X					X							X											P
BRAUN CONSULTING				X				X							X											P
BROADCOM CORP			X					X							X											P
ELCOM INTL			X					X							X											P
GENOME THER			X					X							X											P
INKTOMI			X					X							X											P
INKTOMI				X				X							X											P
INTERNEURON PHARM			X					X							X											P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

ASSET AND/OR UNEARNED INCOME SOURCE	VALUE OF ASSET							TYPE OF INCOME							AMOUNT OF INCOME											TRANS
											C															
													Q													
											G	T	T													
								D	R		A	R	R													
								I	E	I	I	U	U													
								V	N	N	N	S	S													
								D	T	T	S	T	T													
	A	B	C	D	E	F	G							I	II	III	IV	V	VI	VII	VIII	IX	X	XI		
FIDELITY - LO PRC STK FUND			X					X			X					X										S
VANGUARD FUND			X					X			X				X											S
UNION SAVINGS & LOAN			X							X						X										
FIDELITY SAVINGS & LOAN			X							X						X										
JEFFERSON FOR MAYOR CAMP. - LOAN REC.						X		N	O	N	E			X												
JEFFERSON INTERESTS - LOAN RECEIVABLE							X			X				X												
JEFFERSON FOR GOVERNOR - LOAN REC.					X			N	O	N	E			X												P
AMAZON	X										X										X					S
AMERITRADE	X										X								X							S
BEA	X										X						X									S
BROADCOM	X										X				X											S
CMGI	X										X							X								S
CHARTER	X										X				X											S
DELL	X										X								X							S
ETRADE	X										X								X							S
EBAY	X										X							X								S
EUROWEB	X										X								X							S
USATALKS	X										X						X									S
YAHOO	X										X							X								S

Name William J. Jefferson | Page 5 of 12

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	See attached														

This page may be copied if more space is required.

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
AMAZON.COM	X			1/5/99		X								
AMAZON.COM	X			1/11/99		X								
AMAZON.COM		X		1/15/99	X									
AMAZON.COM		X		1/19/99	X									
AMAZON.COM		X		4/8/99		X								
AMAZON.COM		X		12/3/99		X								
AMERITRADE	X			4/14/99	X									
AMERITRADE	X			4/13/99		X								
AMERITRADE	X			4/5/99	X									
AMERITRADE		X		5/3/99		X								
AMERITRADE		X		12/21/99	X									
AMERITRADE		X		12/21/99	X									
AOL	X			3/23/99	X									
AOL	X			3/24/99	X									
AOL	X			4/16/99	X									
AOL	X			4/28/99	X									
AOL	X			5/3/99		X								
AOL	X			12/16/99		X								
AOL		X		6/2/99		X								
AOL		X		7/29/99	X									
AOL		X		7/30/99		X								
AOL		X		12/21/99		X								
BEA SYSTEMS	X			11/17/99		X								
BEA SYSTEMS	X			12/3/99	X									
BEA SYSTEMS		X		11/29/99		X								
BRAUN CONS	X			12/27/99		X								
BROADCOM	X			4/21/99	X									
BROADCOM	X			11/30/99		X								

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
BROADCOM	X			12/23/99	X									
BROADCOM		X		4/28/99	X									
CISCO	X			7/12/99	X									
CMGI	X			1/12/99		X								
CMGI		X		3/2/99		X								
CNET	X			3/11/99		X								
CNET		X		3/22/99	X									
CNET	X			3/23/99	X									
CNET		X		3/25/99	X									
CHARTER COMM	X			11/11/99	X									
CHARTER COMM		X		12/3/99	X									
CISCO	X			5/12/99	X									
CISCO	X			7/12/99	X									
COULTER		X		1/11/99	X									
COULTER		X		1/11/99	X									
CREATIVE TECH		X		12/20/99	X									
CYTEL	X			1/14/99	X									
CYTEL	X			1/14/99	X									
CYTEL		X		1/15/99	X									
CYTEL		X		1/15/99	X									
DELL	X			3/8/99	X									
DELL		X		3/11/99	X									
DELL		X		3/12/99		X								
DELL		X		4/13/99		X								
DELL	X			4/5/99		X								
DELL	X			7/12/99	X									
DELL		X		7/29/99	X									
DURAMED	X			3/25/99	X									
DURAMED		X		3/25/99	X									

8/12

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION			DATE	AMOUNT OF TRANSACTION								
	P	S	E		B	C	D	E	F	G	H	I	J	K
DURAMED		X		6/2/99	X								
EBAY	X			3/3/99		X							
EBAY	X			3/12/99	X								
EBAY		X		3/30/99		X							
EBAY		X		3/30/99	X								
EFAX	X			3/16/99	X								
EFAX		X		4/12/99	X								
ELCOM	X			12/28/99	X								
ESOFT	X			11/17/99	X								
ESOFT		X		11/22/99	X								
EUROWEB	X			12/22/99	X								
EUROWEB		X		12/30/99	X								
ETRADE	X			1/12/99	X								
ETRADE		X		2/23/99	X								
ETRADE	X			4/14/99	X								
ETRADE	X			4/14/99	X								
ETRADE	X			4/5/99	X								
ETRADE	X			5/6/99	X								
ETRADE		X		6/16/99	X								
ETRADE		X		5/3/99	X								
ETRADE		X		5/3/99	X								
ETRADE		X		12/21/99	X								
ETRADE		X		12/30/99	X								
GENOME	X			12/20/99	X								
IMATRON	X			11/17/99	X								
IMATRON		X		12/30/99	X								
INKTOMI	X			12/3/99	X								
INKTOMI	X			12/8/99		X							
INTERNEURON	X			12/27/99	X								

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION			DATE	AMOUNT OF TRANSACTION									
	P	S	E		B	C	D	E	F	G	H	I	J	K
IRVINE		X		3/29/99	X									
JUNO	X			12/21/99		X								
JUNO		X		12/23/99	X									
LATTICE	X			4/21/99	X									
LATTICE		X		6/2/99	X									
LORAL		X		11/29/99	X									
LORAL	X			11/11/99	X									
MPATH	X			4/29/99	X									
MPATH		X		12/30/99	X									
MARKETWATCH	X			1/15/99		X								
MARKETWATCH		X		1/26/99	X									
MICROSOFT		X		1/12/99	X									
MICROSOFT	X			3/29/99		X								
MICROSOFT		X		4/13/99		X								
NDBG	X			4/14/99	X									
NDBG	X			4/13/99		X								
NDBG		X		7/29/99	X									
NOKIA	X			11/30/99	X									
NOVELLUS	X			12/20/99		X								
ONEMAIN		X		3/25/99	X									
ONEMAIN	X			3/25/99	X									
ORACLE		X		1/6/99	X									
PRICELINE	X			3/30/99	X									
PRICELINE		X		3/30/99	X									
PRICELINE		X		4/5/99	X									
QUALCOMM	X			12/30/99		X								
RED HAT	X			11/29/99		X								
RED HAT		X		12/27/99		X								
RED HAT		X		12/30/99		X								

SCHEDULE IV - TRANSACTIONS

ASSET	TYPE OF TRANSACTION P	S	E	DATE	AMOUNT OF TRANSACTION B	C	D	E	F	G	H	I	J	K
RICHARDSON ELEC	X			12/22/99	X									
SCIENTIFIC ATLANTA	X			11/30/99	X									
SCIENTIFIC ATLANTA		X		12/21/99	X									
SKYMALL		X		1/11/99	X									
SKYMALL		X		1/19/99	X									
SPYGLASS	X			4/8/99	X									
SPYGLASS		X		4/9/99	X									
SUNGLASSHUT	X			1/14/99	X									
SUNGLASSHUT		X		1/15/99	X									
TELTRONICS		X		1/19/99	X									
UBID	X			1/12/99	X									
UBID		X		1/19/99	X									
USA TALKS		X		1/26/99	X									
USATALKS	X			1/14/99	X									
VALUEVISION		X		1/11/99	X									
XOOM	X			4/13/99		X								
XOOM		X		11/29/99		X								
YAHOO	X			2/23/99	X									
YAHOO	X			3/12/99		X								
YAHOO		X		4/14/99		X								
YAHOO		X		4/16/99	X									
YAHOO	X			4/8/99		X								
YAHOO		X		11/19/99		X								
FIDELITY - LO PRC STK		X		12/7/99	X									
FIDELITY - LO PRC STK		X		12/7/99	X									
VANGUARD FUND		X		12/8/99	X									
JEFFERSON FOR GOVERNOR - LOAN REC.	X			10/20/99			X							

Name William J. Jefferson | Page 11 of 12

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wright Patman Credit Union	Secured/Automobile	X									
	E*Trade Securities, Palo Alto, CA	Margin Account				X						
	Liberty Bank, New Orleans, LA	Unsecured		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	William J. Jefferson	Page 12 of 12

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None during reporting period.	
	See 1990 Disclosure Form for prior	
	agreement.	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
RESOURCE CENTER
00 MAY 15 AM 9:59
HAND DELIVERED
MC (10)
(Office Use Only)

William Lewis Jenkins
(Full Name)

767 McKinney Chapel Road, Rogersville, TN, 37857
(Mailing Address)

(423) 272-3878
Daytime Telephone

Filer Status	[X] Member of the U S House of Representatives — State TN District 1st	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William L. Jenkins	5-15-00

2340

Name William Lewis Jenkins	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Tennessee Consolidated Retirement System	Legislative - Judicial Retirement	$28,170.24
	State of Tennessee Consolidated Retirement System	Spouse - Teachers Retirement	3,229.62

For payments to charity in lieu of honoraria, use Schedule II.

Name William Lewis Jenkins	Page 3 of 10

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	N/A			

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Name William Lewis Jenkins | Page 4 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

				A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock					X								X										X									P
			Simon & Schuster			Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts						X									X									X								
JT	Building Main Street Rogersville, TN						X										X						X												
JT	Farm Land, Bray Road Rogersville, TN								X																										
JT	Farm Land, McKinney Chapel Road Rogersville, TN (formerly Old Mill Rd)								X																										
SP	Farm Land - Drew Haynes Road Rogersville, TN								X																										
JT	Farm Land - Highway 70 Rogersville, TN						X																												
SP	Farm Lane - Webster Valley Road Rogersville, TN									X																									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William Lewis Jenkins

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Farm Lane Off Highway 70 Rogersville, TN						X																								
JT	Cattle				X																										
JT	Farm Machinery				X																										
	½ remainder interest Farm Land Hickory Cove, Rogersville, TN					X																									
	~~Farm income from land, cattle machingery (Gross $23,287.00)~~ (Net $399.00)																														
	Mountain Metals MFG Corp.						X						X													X					
SP	1st TN National Corporation						X						X											X							
SP	Exxon Corporation			X									X									X									
SP	Amoco BP (formerly Amoco)				X								X									X									
	IRS-1st TN Bank Trust Dept. Johnson City, TN (Managed)								X				X		X											X					
SP	IRS-1st TN Bank Trust Dept. Johnson City, TN (Managed)						X						X		X									X							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William Lewis Jenkins

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Farm Checking Account 1st TN Bank			X												X						X										
JT	Checking Account Citizens Bank			X												X							X									
	Savings Account Citizens Bank			X												X							X									
SP	Savings Account 1st TN Bank			X												X							X									
JT	Checking Account 1st TN Bank			X												X							X									

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Name William Lewis Jenkins | Page 7 of 10

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10–12–99		X								
	NONE														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples.	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
N/A							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	State of Tennessee - William Lewis Jenkins	(same as 98)

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 10 PM 1:47
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)
10

Christopher Charles John
(Full Name)

PO Box 97 Crowley LA. 70527
(Mailing Address)

(202) 225-2031
Daytime Telephone

Filer Status: [X] Member of the U.S. House of Representatives — State LA District 07 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Christopher John	May 10, 2000

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Name	Page 2 of 10
Christopher John	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash , D C	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$500
	N/A			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	Mega Corp. Stock	E: X	DIVIDENDS: X	VI: X	P
DC	*Examples:* Simon & Schuster	Indefinite	Other Type of Income: Royalties	IX: X	
JT	1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: X	
	John John Trucking Crowley LA	H: X	INTEREST: X	I: X	
	891 Walthew Crowley LA	D: X	RENT: X	V: X	
	1108 11th Street Crowley LA	C: X	RENT: X	V: X	
	1124 Hwy 90 Crowley LA	E: X	RENT: X	VI: X	
	1220 Hwy 90 Crowley LA	D: X	RENT: X	VI: X	
	Evangeline Bank Crowley LA	C: X	INTEREST: X	III: X	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Christopher John

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	Xi Over $5,000,000	P, S, E
	JOHN AND JOHN TRAVEL Crowley LA	X																			X										
	Big Dekke Properties Crowley LA							X							X												X				
	NY Life IRA Crowley LA			X										X									X								
	Kemper Fund Baton Rouge LA				X											X							X								
	Jones Cable Minneapolis MN			X																	X										
	Congressional Credit Wash DC		X													X						X									
SP	General Electric			X										X								X									

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SCHEDULE IV — TRANSACTIONS

Name Christopher John

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset		Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock		X			10–12–99		X								
	America Online Inc	Stock		X		5-17-99	X									
	Broadcast Com Inc	Stock		X		5-20-99	X									
	Central Sprinkler Inc	Stock		X		6-29-99	X									
	Etrade Group Inc	Stock		X		5-26-99	X									
	Global Inds Ltd	Stock		X		7-7-99	X									
	1-800 Contacts Inc	Stock		X		5-5-99	X									
	Intraware Inc	Stock		X		10-6-99	X									
	Microsoft Inc	Stock		X		4-7-99	X									
	O Media Inc	Stock		X		5-24-99	X									
	Ocean Energy Inc	Stock		X		9-30-99	X									
	Omni Energy Inc	Stock		X		12-29-99	X									
	Omni Energy Inc	Stock	X			10-13-99	X									
	O Media Inc	Stock	X			7-16-99	X									
	Microsoft Inc	Stock	X			4-1-99	X									
	Mako Cap Inc.	Stock	X			4-13-99	X									

This page may be copied if more space is required.

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Name Christopher John

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–99		X								
	Intraware Inc Stock	X			7-7-99	X									
	1-800 Contacts Inc Stock	X			4-1-99	X									
	Grey Wolf Inc Stock	X			5-19-99	X									
	Global Inds Inc Stock	X			4-12-99	X									
	Central Sprinkler Inc Stock	X			6-15-99	X									
	Broadcast Com Inc Stock	X			3-22-99	X									
	America Online Inc Stock	X			5-17-99	X									

This page may be copied if more space is required.

Name Christopher John

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	JOHN N JOHN TRUCKLINE INC Crowley LA	Personal Loan			X							
	Evangeline Bank Crowley LA	Bussiness Loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

N/A

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Delta Airlines - Coca-Cola - Turner Broadcast	Oct 24-25	Alexandria LA-Atlanta - DC	Y	Y	N	N
	Democratic Leadership Council	April 30-May 3	NONE	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	N/A

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

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Use additional sheets if more space is required.

CHRIS JOHN
7TH DISTRICT LOUISIANA
1504 LONGWORTH HOB
WASHINGTON, DC 20515
(202) 225-2031
FAX (202) 225-5724

800 LAFAYETTE ST. SUITE 1400
LAFAYETTE LA 70501
(337) 235-6322
FAX (337) 235-6072

1011 LAKESHORE DR. SUITE 306
LAKE CHARLES, LA 70601
(337) 433-1747
FAX (337) 433-0974

COMMITTEES:
COMMITTEE ON RESOURCES
SUBCOMMITTEE
ENERGY AND MINERAL RESOURCES
COMMITTEE ON AGRICULTURE
SUBCOMMITTEE
RISK MANAGEMENT, RESEARCH AND SPECIALTY CROPS

Congress of the United States
House of Representatives
Washington, DC 20515–1807

June 8, 2000

The Honorable Jeff Trandahl
The Clerk, U. S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, DC 20515-6612

MC

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Dear Mr. Trandahl:

In reviewing my 1999 Financial Disclosure form I realized that some information had inadvertently been omitted from the report. I have therefore enclosed amendments to my report which reflect the discrepancies and ask that you attach them to my original Financial Disclosure form.

Thank you for your attention to this matter. If you should have any questions, please feel free to contact me at 5-2031.

Sincerely,

Chris John
MEMBER OF CONGRESS

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Christopher John

Page Amendment of 99

SP, DC, JT	Asset and/or Income Source (BLOCK A)	Block B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	Block C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	Block D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	Block E Transaction: P, S, E
	Greg Wolf Stock			X																												
	America Online Stock	X															X						X									
	Broadcast.Com Stock	X															X						X									
	Central Sprinkler Stock	X															X							X								
	Etrade Group Stock	X															X						X									
	Globalink Industries Stock	X															X							X								
	Ocean Energy Stock	X															X							X								
	* Big Drake Properties																															
	- FARM - HAYS, LA.						X								X											X						
	- Truck Terminal - Bossier City LA						X								X											X						

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SCHEDULE IV — TRANSACTIONS

Name Christopher John

Amendment Page 10 of 99

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-97		X								
	Etrade Group Inc Stock	X			2-22-99	X									
	Ocean Energy Inc. Stock	X			2-22-99	X									

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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HAND DELIVERED

(Office Use Only)

Eddie Bernice Johnson
(Full Name)

2501 Cedar Springs Road #550
(Mailing Address)

214 - 922-8885
Daytime Telephone

Dallas, Texas 75201

Filer Status	[X] Member of the U.S. House of Representatives	State Texas District 30th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Eddie Bernice Johnson	5/16/2000

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Name Eddie Bernice Johnson	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Texas	Legislative Pension	$25,000

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	N/A			

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Name Fddie Bernice Johnson

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp Stock					X								X										X								P
Examples	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	Mutual of America				x									x							n/a											
	Texas Fed Credit Union			x												x						x										
	U.S. Savings Bond			x												x					n/a											
	Waterhouse Securities				x									x												x						
	EBJ & Associates	x																	x		n/a											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Eddie Bernice Johnson

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	N/A																														

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Name Eddie Bernice Johnson | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
	N/A														

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Name Fddie Bernice Johnson

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule

Source		Description	Value
Example	Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash , D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	Brown University Providence, RI	Jan 29 '99 Jan 30 '99	Dallas, Texas - Provi dence, RI - Wash., DC	Y	Y	N	N
	Dayton, Ohio Chapter Links, Inc.	Oct 30 '99	Wash., DC - Dayton, O... OH -	-	Y	N	N
	CA Democratic Party	Oct 30 '99	San Francisco, CA -	Y	Y	N	N
		Oct 31 '99	Washington, DC				

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A		

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U.S. HOUSE OF REPRESENTATIVES

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

Nancy Lee Johnson (Full Name)
2113 Rayburn Building (Mailing Address)
Washington DC 20515
Daytime Telephone (202) 225-4476

Filer Status	[X] Member of the U.S. House of Representatives	State CT District 6	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Nancy L. Johnson	May 8, 2000

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1 000
	Ontario County Board of Education	Spouse Salary	NA
	Grove Hill Medical Center	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Examples	SP	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP		SP	Mega Corp. Stock					X								X																		P
DC			Simon & Schuster		Indefinite																	Royalties									X			
JT			1st Bank of Paducah, KY accounts						X									X										X						
	American Savings Bank IRA					X												X							X									
	Fidelity Balanced Fund IRA					X												X							X									
	Fidelity CT Tax Free Hi Yield						X											X								X								
	Fidelity Gov't Securities				X											X								X										
	Nuveen CT Premium Income Munic.						X									X										X								

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nancy Lee Johnson

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1 000	C $1 001 - $15,000	D $15 001 – $50,000	E $50 001 – $100 000	F $100,001 – $250,000	G $250 001 – $500 000	H $500,001 – $1,000,000	I $1,000 001 – $5,000,000	J $5,000, 001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Invesco Indust. Income fund			X										X			X						X									
	(now known as Equit. Inc. fund)																															
	Stanley Works stock						X							X										X								
	Vanguard Star Portfolio				X									X											X							
	Merill Lynch - IRA									X				X			X											X				
	Lindner Dividend Fund - IRA			X										X			X						X									
	Vanguard Wellington Fund		X											X									X									
	Scudder International Fund - IRA			X													X							X								
	Charles Schwab MM Fund				X											X								X								
	Vanguard Wellesley Fund		X											X							X											
	Vanguard Treas. MM Fund				X											X							X									
	Mutual Shares Fd - IRA				X									X			X						X									
	First City Bank - IRA			X												X							X									
	Fidelity Utilities Inc. Fund - IRA				X									X			X							X								
	Ginos Assoc.				X										X									X								
	ICC Harbin Ltd. Partner			X												X						X										
	Janus Flexible Inc Fund			X										X								X										
	Janus Twenty Fund				X									X			X							X								P
	Janus - World Wide Fund				X									X			X							X								
	Janus - Growth + Income Fund IRA			X										X			X							X								
	Vanguard ~~Extended~~ Mkt. Fund (Index)			X										X			X							X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nancy Lee Johnson

SP. DC JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P. S. E
	Fidelity Equity Income II Fund-IRA	C	DIVIDENDS; CAPITAL GAINS	III	P
	Fidelity Asset Manager-IRA	D	DIVIDENDS; CAPITAL GAINS	V	P
	Fidelity Midcap Stock-IRA	C	CAPITAL GAINS	III	P
	Fidelity Global Balanced-IRA	C	DIVIDENDS	II	P
	Fidelity Tax Exempt MM Fund	C	INTEREST	II	P
	Janus Balanced Fund	C	CAPITAL GAINS	II	P
	Janus Global Tech	D	CAPITAL GAINS	II	P
	Fidelity Select Tech	C	CAPITAL GAINS	III	P
	Fidelity Ret. Growth	C	CAPITAL GAINS	III	P
	Vanguard Growth Index	C	CAPITAL GAINS	II	P
	Nuveen Municipal Bond	C	INTEREST	IV	P
	Nuveen Unit Investment Trusts	D	INTEREST	IV	P
	First City Bank Checking	C	INTEREST	III	P
	First City Bank Stock	C	DIVIDENDS	II	P
	Fidelity Growth + Income - IRA	C	INTEREST	III	P

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SCHEDULE IV — TRANSACTIONS

Name Nancy Lee Johnson

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
	Janus Twenty Fund	X			4.9.99	X									
	Janus Balanced Fund	X			1.19.99	X									
	Janus Global Tech Fund	X			4.9.99	X									
	" " " "	X			12.15.99	X									
	Vanguard Willington			X	12.15.99	X									
	Vanguard Growth Index			X	12.15.99	X									
	Fidelity Select Technology	X			1.31.99	X									
	Fidelity Spartan Ginnie Mae → Fid. Utilities			X	7.27.99	X									
	Fidelity Spartan Ginnie Mae → Fidel. Retirem. growth			X	7.27.99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	Aug 16-21	Wash. DC - Berlin - DC	Y	Y	Y	N
	Chinese People's Institute of Foreign Affairs	July 2-12	Wash. DC - Hong Kong - DC	Y	Y	Y	N

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
MAIL PROCESSING CENTER
00 MAY 11 AM 11:20
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

7

HC

The Honorable Samuel Robert Johnson
(Full Name)

1030 Longworth House Office Building
(Mailing Address)

Washington, D. C. 20515

Daytime Telephone 202-225-4201

Filer Status: [X] Member of the U.S. House of Representatives — State Texas District 3 — [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**		X
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**		X
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	X
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Sam Johnson	5-10-00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
The KMart Family Foundation	Participated in Racing Contest to Help a Charity: MADD Dallas Metropolitan Chapter	Sept. 22, 1999	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Samuel Robert Johnson

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction P, S, E
SP	Mega Corp Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	Book Royalties TX A&M U. Press		Indefinite																	Royalties		X										
JT	Legacy Bank - Interest		X													X						X										
JT	Congressional FCU - Interest		X													X						X										
T	USAF Disability - Non-Taxable																			Disability						X						

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name Samuel Robert Johnson

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
	None														

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Heritage Foundation	Aug. 9-17	Wash., D.C. - Hong Kong -				
	1999	China - Beijing -				
		Shanghai, Taipei	Y	Y	Y	Y (2 days)
1999 Bipartisan Congressional						
Retreat (Hershey, PA)						
Sponsor:						
Aspen Institute	Mar. 19-21	Does Not Apply	Y	Y	Y	N
		Provided own transportation				

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
Board Member	Air Force Association
Board Member	Practical Parent Education
Board of Regents	Smithsonian Institution, Washington, D. C.
Board Member	Dedman College at SMU, Dallas, Texas
Board Member	Frontiers of Flight, Dallas, Texas
Advisory Board	Plano, Texas Chamber of Commerce
Stockholder, President	SRJ Designs - Activity has been dormant for over 2 years.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

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2386

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Stephanie Tubbs-Jones
(Full Name)

1516 Longworth House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone (202) 225-7032

Filer Status	[X] Member of the U.S. House of Representatives	State OH District 11	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date.

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gifts in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions.(See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Stephanie Tubbs Jones	5/15/00

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE	NONE	$0.00

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page ___ of ___

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D C.	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$ 500

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year **Exclude** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples* SP: Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT Fidelity Investments	$1 - $1,000	Interest	$1 - $200	
JT Jihaad Filmworks	$1,001 - $15,000	NA	None	
Public Employees Retirement System	$100,001 - $250,000	NA	NA	
Ohio Deferred Compensation Plan	$100,001 - $250,000	NA	NA	
New York Life Insurance	$1,001 - $15,000	NA	NA	
DC New York Life Insurance	$1,001 - $15,000	NA	NA	
SP New York Life Insurance	$1,001 - $15,000	NA	NA	

Name Stephanie Tubbs-Jones | Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Name Stephanie Tubbs-Jones | Page ___ of ___

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	961 East 141st Cleveland OH 44110	Sold	4/25/99	$50,001 - $100,000
SP	850 East 141st Cleveland, OH 44110	Sold	5/13/99	$50,001 - $100,000
SP	495 Eddy Road Cleveland, OH 44110	Purchase	1/28/99	$50,001 - $100,000
SP	3606 East 147th Cleveland,OH 44110	Purchase	7/27/99	$50,001 - $100,000

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del	$100,001 - $250,000
	Congressional Federal Credit Union	Credit Card	$10,001 - $15,000
SP	Superior Bank FSB	Mortgage	$50,001 - $100,000
SP	Household Finance	Mortgage	$50,001 - $100,000

Name	Page ___ of ___

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar.2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
The Committe 21 Womens Law Group	April 15-16, 1999	Wash. DC-New Orleans-Cleveland	Y	Y	N	None
Delta Sigma Theta Sorority	July 16-18, 1999	Wash. DC-Minneapolis-Wash. DC	Y	Y	N	None
Delta Sigma Theta Sorority	July 24-25, 1999	Cleveland-Charlotte-Cleveland	Y	Y	N	None
AIPAC	August 24-Sept 2, 1999	Cleveland-NY-Cleveland	Y	Y	Y	None
AIPAC	August 25-Sept 2, 1999	New York-Tel Aviv-New York	Y	Y	Y	None
Convention Bureau of St Croix	October 15-17, 1999	Wash DC-St. Croix-Wash DC	Y	Y	N	None
Montgomery County Community College	October 22-24, 1999	Cleveland-Philadelphia-Cleveland	Y	Y	N	None
California Democratic Party	October 30-31, 1999	Cleveland-SanFransisco-Cleveland	Y	Y	N	None
Las Vegas Urban Chamber of Commerce	Nov 11-14, 1999	Cleveland-Las Vegas-Cleveland	Y	Y	Y	None
California Democratic Party	Dec 11-12, 1999	Cleveland-San Fransisco-Cleveland	Y	Y	N	None

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I

Position	Organization
Trustee	Bethany Baptist Church, Cleveland, Ohio
Trustee	Cleveland Bar Association, Cleveland, Ohio
Member	Board of Governors, Ohio State Bar Association, Columbus, Ohio
Member	Board of Regents, National College of District Attorneys, Houston, Texas
Trustee	Community Reentry Program/Partnership for Safer Cleveland, Cleveland, Ohio
Member	Visiting Committee Case Western Reserve University Law School
Trustee	Hawken School, Cleveland, Ohio

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
January 2, 1999	Member, Public Employees' Retirement System	Agreement permits Member to continue participation in existing pension plan for her service as a former employee of Cuyahoga County, Ohio.

COMMITTEE ON BANKING AND FINANCIAL SERVICES
SUBCOMMITTEES
CAPITAL MARKETS, SECURITIES AND GOVERNMENT SPONSORED ENTERPRISES
HOUSING AND COMMUNITY DEVELOPMENT

COMMITTEE ON SMALL BUSINESS
SUBCOMMITTEE ON EMPOWERMENT

HAND DELIVERED

WASHINGTON OFFICE
1516 LONGWORTH HOUSE OFFICE BLDG
HOUSE OF REPRESENTATIVES
WASHINGTON, DC 20515
(202) 225-7032
FAX: (202) 225-1339

DISTRICT OFFICE
3645 WARRENSVILLE CENTER ROAD
SUITE 204
SHAKER HEIGHTS, OH 44122
(216) 522-4900
FAX: (216) 522-4908

Stephanie Tubbs Jones
Congress of the United States
11th District, Ohio

June 14, 2000

(10)

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U. S. HOUSE OF REPRESENTATIVES

✓ MC

Hon. Lamar Smith
Chairman
House Committee on Standards
of Official Conduct
HT-2
The Capitol
Washington, DC 20515

Re: Amendments to 1998 and 1999 Financial Disclosure Statements

Dear Chairman Smith:

Attached please find my Amended 1999 Public Financial Disclosure Statement, which replaces the Statement I filed on May 15, 2000.

In addition, I hereby amend my 1998 Public Financial Disclosure Statement as follows:

Addition to Schedule III: Assets and "Unearned Income"

Asset: 961 E. 141st Street, Cleveland, OH 44110
Value: $50,001-$100,000
Type of Income: NA
Amount of Income: NA
Transaction: Purchased

Asset: 850 East 141st Street, Cleveland OH 44110
Value: $50,001-$100,000
Type of Income: NA
Amount of Income: NA
Transaction: Purchased

PRINTED ON RECYCLED PAPER

Addition to Schedule IV: Transactions

Asset: 961 E. 141st Street, Cleveland, OH 44110
Type of Transaction: Purchase
Date: October 1998
Amount of Transaction: $50,001-$100,000

Asset: 850 East 141st Street, Cleveland OH 44110
Type of Transaction: Purchase
Date: October 1998
Amount of Transaction: $50,001-$100,000

Thank you for your consideration. Please do not hesitate to contact me should you have any questions.

Sincerely,

Stephanie Tubbs Jones
Member of Congress

Attachment: Amended 1999 Public Financial Disclosure

c: Mr. John Varga

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Stephanie Tubbs-Jones
(Full Name)

1516 Longworth House Office Building
(Mailing Address)
Washington DC 20515

Daytime Telephone: (202) 225-7032

Filer Status	[X] Member of the U.S. House of Representatives	State: OH District: 11	[ ] Officer or Employee — Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V. Did you, your spouse or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS–Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Stephanie Tubbs Jones	6/14/00

2399

Name Stephanie Tubbs-Jones	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
	SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
	1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
JT	Fidelity Investments	$1 - $1,000	Interest	$1 - $200	
JT	Jihaad Filmworks	$1,001 - $15,000	NA	None	
	Public Employees Retirement System	$100,001 - $250,000	NA	NA	
	Ohio Deferred Compensation Plan	$100,001 - $250,000	NA	NA	
SP	495 Eddy Road Cleveland OH 44110	$50,001 - $100,000	Rent	$1,001 - $2,500	P
SP	961 East 141st Cleveland OH 44110	$50,001 - $100,000	Capital Gains	$15,001 - $50,000	S

Name Stephanie Tubbs-Jones	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	850 East 141st Cleveland OH 44110	$50.001 - $100.000	Capital Gains	$15.001 - $50.000	S
SP	3606 East 147th Cleveland OH 44110	$50.001 - $100.000	NA	NA	P

Name Stephanie Tubbs-Jones	Page ___of ____

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Our Place, Inc., Cleveland, Ohio	Spouse Salary	$9,100.00

For payments to charity in lieu of honoraria, use Schedule II.

Name Stephanie Tubbs-Jones | Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	961 East 141st Cleveland OH 44110	Sold	4/25/99	$50,001 - $100,000
SP	850 East 141st Cleveland, OH 44110	Sold	5/13/99	$50,001 - $100,000
SP	495 Eddy Road Cleveland OH	Purchase	1/28/99	$50,001 - $100,000
SP	3606 East 147th Cleveland OH 44110	Purchase	7/27/99	$50,001 - $100,000

Name Stephanie Tubbs-Jones	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	MBNA America	Credit Card	$10,001 - $15,000

Name Stephanie Tubbs-Jones	Page____ of _____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Trustee	Bethany Baptist Church, Cleveland, Ohio
Trustee	Cleveland Bar Association, Cleveland, Ohio
Member	Board of Governors, Ohio State Bar Association, Columbus, Ohio
Member	Board of Regents, National College of District Attorneys, Houston, Texas
Trustee	Community Reentry Program/Partnership for Safer Cleveland, Cleveland, Ohio
Member	Visiting Committee Case Western Reserve University Law School
Trustee	Hawken School, Cleveland, Ohio

Name Stephanie Tubbs-Jones | Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
January 2, 1999	Applicant, Public Employees' Retirement System	Agreement permits Member to continue participation in existing pension plan her service as a former employee of Cuyahoga County, Ohio.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Walter Beaman Jones
(Full Name)

422 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202/225-3415

Filer Status	[X] Member of the U S House of Representatives	State NC District 03	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Walter Beaman Jones	5/15/2000

2407

Name Walter Beaman Jones | Page 2 of 5

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**			BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left			at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC JT	*Examples*	SP	Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Bradford Money Fund			$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Centura Bank			$1 - $1,000	Dividends	$1 - $200	NA
JT	Delaware Group Treasury			$1,001 - $15,000	Dividends	$1 - $200	S
JT	Ford Motor Company			$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Investors Title Company			$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Merck & Company			$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Nations Bank			$1,001 - $15,000	Dividends	$1 - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Sara Lee	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Nucor	$1,001 - $15,000	Dividends	$1 - $200	NA
JT	Philip Morris	$50,001 - $100,000	Dividends	$201 - $1,000	NA
JT	BB&T	$50,001 - $100,000	Dividends	$201 - $1,000	NA
JT	Putman New Growth Opportunities	$50,001 - $100,000	Dividends	$201 - $1,000	NA
SP	Floyd Harrell, Rt. 4, Tarboro, NC 27886	$1,001 - $15,000	Rent	$5,001 - $15,000	NA
SP	Millie Peeden, Peeden Farms, Belvoir, NC	$1,001 - $15,000	Rent	$2,501 - $5,000	NA
SP	Wallace James, Robersonville, NC	$1,001 - $15,000	Rent	$2,501 - $5,000	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	Delaware Group Treasury	Sold	Sept. 1999	$1,001 - $15,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Board of Directors	Eastern Carolina Vocational Center, Inc., Greenville, NC

WALTER B. JONES
3D DISTRICT, NORTH CAROLINA

ROOM 422
CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
TELEPHONE (202) 225-3415

COMMITTEES:
COMMITTEE ON BANKING AND FINANCIAL SERVICES
COMMITTEE ON NATIONAL SECURITY
COMMITTEE ON RESOURCES

Congress of the United States
House of Representatives
Washington, DC 20515–3303

DISTRICT OFFICE:
102-C EASTBROOK DRIVE
GREENVILLE, NC 27858
(252) 931-1002

(800) 351-1697

HAND DELIVERED

RECEIVED
00 JUN -8 PM 4:01

June 8, 2000

The Honorable Lamar S Smith, Chairman
Standards of Official Conduct
Ht-2 The Capitol
Washington, D.C. 20515

MC

Dear Congressman Smith:

It has come to my attention that there were discrepancies in my financial disclosure statements for both calendar years 1998 and 1999.

An amendment to my 1999 statement has been enclosed. The value of my assets in Philip Morris was incorrectly entered as $50,001 - $100,000 when the correct amount is $15,001- $50,000.

It has come to my attention that the value of my assets in Putman New Growth Opportunities was also entered incorrectly on my 1998 statement. It was entered as $1,0001 - $15,000; however, the correct amount is $15,001- $50,000. The amount listed on my 1999 statement for Putman New Growth is correctly listed as $50,001 - $100,000.

I apologize for the inconvenience and appreciate this opportunity to ensure that my financial disclosures exhibit the correct information.

Sincerely,

Walter B. Jones

Walter B. Jones
Member of Congress

Enclosure

RESOURCE CENTER
00 JUN -8 PM 4:01
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Walter Beaman Jones
(Full Name)

422 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202/225-3415

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: NC District: 03	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Walter B. Jones	June 8, 2000

Name Walter Beaman Jones	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples*	SP Mega Corp Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
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JT	Ford Motor Company	$1,001 - $15,000	Dividends	$1 - $200	NA
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JT	Merck & Company	$1,001 - $15,000	Dividends	$1 - $200	NA
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Name Walter Beaman Jones | Page ___ of ___

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Sara Lee	$1,001 - $15,000	Dividends	$1 - $200	NA
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JT	BB&T	$50,001 - $100,000	Dividends	$201 - $1,000	NA
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SP	Floyd Harrell, Rt. 4, Tarboro, NC 27886	$1,001 - $15,000	Rent	$5,001 - $15,000	NA
SP	Millie Peeden, Peeden Farms, Belvoir, NC	$1,001 - $15,000	Rent	$2,501 - $5,000	NA
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WALTER B. JONES
3D DISTRICT, NORTH CAROLINA

ROOM 422
CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
TELEPHONE: (202) 225-3415

COMMITTEES
COMMITTEE ON BANKING AND FINANCIAL SERVICES
COMMITTEE ON NATIONAL SECURITY
COMMITTEE ON RESOURCES

INSIDE MAIL

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LEGISLATIVE RESOURCE CENTER
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OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

DISTRICT OFFICE
102-C EASTBROOK DRIVE
GREENVILLE, NC 27858
(252) 931-1003

(800) 351-1697

Congress of the United States
House of Representatives
Washington, DC 20515–3303

June 8, 2000

The Honorable Lamar S. Smith, Chairman
Standards of Official Conduct
Ht-2 The Capitol
Washington, D.C. 20515

MC

RECEIVED
00 JUN -9 AM 9:31
COMMITTEE ON STANDARDS

Dear Congressman Smith:

It has come to my attention that there were discrepancies in my financial disclosure statements for both calendar years 1998 and 1999.

An amendment to my 1999 statement has been enclosed. The value of my assets in Philip Morris was incorrectly entered as $50,001 - $100,000 when the correct amount is $15,001- $50,000.

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Sincerely,

Walter B. Jones

Walter B. Jones
Member of Congress

Enclosure

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
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RECEIVED
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COMMITTEE ON STANDARDS
(Office Use Only)

Walter Beaman Jones
(Full Name)

422 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202/225-3415

Filer Status	[X] Member of the U.S. House of Representatives	State NC District 03	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[ ]	[X]
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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Walter B. Jones	June 8, 2000

2417

Name Walter Beaman Jones	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

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JT	Nations Bank	$1,001 - $15,000	Dividends	$1 - $200	NA

Name Walter Beaman Jones | Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

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SP	Wallace James, Robersonville, NC	$1,001 - $15,000	Rent	$2,501 - $5,000	NA

RECEIVED
FINANCIAL DISCLOSURE RESOURCE CENTER
00 MAY 15 PM 3:53
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Paul E. Kanjorski
(Full Name)

103 South Hanover Street
(Mailing Address)

Nanticoke PA 18634

Daytime Telephone: 202-225-6511

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 11	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

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III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Paul E. Kanjorski	5/15/00

2420

Name Paul E. Kanjorski	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A Asset and/or Income Source		BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
Identify (a) each asset held for investment or productio of income with a fair market value exceeding $1,000 the end of the reporting period, and (b) any other asset or source of income which generated more than $200 "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude**: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the liste categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
SP	Cross Valley Credit Union	$50,001 - $100,000	Interest	$2,501 - $5,000	NA
JT	IRA Equitable Life	$1,001 - $15,000	none	None	NA
JT	IRA Prudential Life Bache Securities, AM Capital Government Fund	$50,001 - $100,000	none	None	NA
	Real property -- 20+ acres, 1/2 interest Dallas Twp , Luzerne Co., PA	$250,001 - $500,000	none	None	NA
	Real property -- 90+ acres, 1/5 interest Wright Twp , Luzerne Co., PA	$500,001 - $1,000,000	none	None	NA

Name Paul E. Kanjorski	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	1/10 interest, father's estate	$15,001 - $50,000	none	None	NA
	1/5 interest, mother's estate	$15,001 - $50,000	none	None	NA
	1/2 interest, 126 S Franklin St , Wilkes-Barre, PA	$100,001 - $250,000	Rent	$15,001 - $50,000	NA
	law office movable assets	$1,001 - $15,000	none	None	NA

Name Paul E. Kanjorski	Page ___of___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Guaranty National Bank	mortgage on 1/2 interest in 126 S. Franklin St., Wilkes-Barre, PA	$50,001 - $100,000

Name Paul E. Kanjorski	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug. 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Nuclear Energy Institute	Mar. 31 to Apr. 3	Las Vegas to Alburquerque Tour of Yucca Mountain	Y	N	Y	3 days
World Council of Credit Unions	Aug. 12 to Aug. 29	Balt. to Sydney, Australia to Balt.	Y	Y	Y	14 days

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Marcy (Marcia) C. Kaptur
(Full Name)

420 Madison Ave Ste 1250
(Mailing Address)

Toledo OH 43604
Daytime Telephone: 419-259-7500

Filer Status	[X] Member of the U S House of Representatives	State: OH District 09	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS– Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Marcy (Marcia) C. Kaptur	5-12-2000

Name Marcy (Marcia) C. Kaptur	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keane State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Congressional Quarterly, Inc	Royalties for book writing (Women of Congress)	$530.19

For payments to charity in lieu of honoraria, use Schedule II.

Name Marcy (Marcia) C. Kaptur	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples*	SP Mega Corp Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Standard Federal Bank	$1,001 - $15,000	Interest	$201 - $1,000	
	Little Flower Federal Credit Union	$50,001 - $100,000	Interest	$2,501 - $5,000	
	Key Bank	$1 - $1,000	Interest	$1 - $200	
	Charter One Bank	$15,001 - $50,000	Interest	$2,501 - $5,000	
	U.S. Savings Bonds	$50,001 - $100,000	N/A	None	
	Transamerica IRA	$15,001 - $50,000	N/A	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

1854 Harlan Rd, Toledo, OH 43615	$50,001 - $100,000	Rent -- property upkeep and maintenance resulted in realized income of $201.00 in 1999.	$5,001 - $15,000	
Congressional Federal Credit Union	$1,001 - $15,000	Interest -- all funds accrued in this separate account are from Congressional pay (raises) and are distributed annully to charitable causes.	$1 - $200	

Name Marcy (Marcia) C. Kaptur	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
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Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Veterans of Foreign Wars of the United States	8/15-8/16	Toledo-Kansas City- Toledo	Y	N	N	0
Project Interchange for Israel	8/21-8/27	Toledo-TelAviv	Y	Y	N	0
Amer. Task Force on Lebanon	8/27-9/1	TelAviv-Damascus-Lebanon-Toledo	Y	Y	N	0

Name Marcy (Marcia) C Kaptur	Page ____ of _____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Trustee	The Anastasia Fund, P.O. Box 2121, Toledo, OH 43603 [a public charity established in the names of Anastasia and Stephen Kaptur]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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John R. Kasich
(Full Name)

7825 Lanetta Lane
Westeville, Ohio 43082
(Mailing Address)

614-523-2555
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State Ohio District 12th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

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TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	John R. Kasich	May 12, 2000

2431

Name	John R. Kasich	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Gerbig, Snell/Weisheimer and Associates	Spouse Salary	n/a

For payments to charity in lieu of honoraria, use Schedule II.

Name	John R. Kasich	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 1999	$500
Doubleday Book Company Made payments to charities as a result of royalties made on Courage is Contagious by John Kasich. A list of payments made has been requested from the publisher and will be filed as an addendum to this report as soon as the list is received.			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: John R. Kasich

Page ___ of ___

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X									X									P
	Simon & Schuster		Indefinite																	Royalities								X			
	1st Bank of Paducah, KY accounts						X									X									X						
	BankOne, Columbus, OH			X												X						X									
	Wright Patman Credit Union			X												X						X									
	Northwestern Mutual Life Annuities (7)					X								X								n/a									
	Northwestern Mutual Variable Annuities (2)					X								X								n/a									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John R. Kasich

Page ___ of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Putnam U.S. Govt. Sec.						X							X										X								
	Washington Mutual Inv. Fd						X							X												X						
	Investment Co. of America						X							X												X						
	Munder Funds NetNet Fd			X										X							X											
	Goldman Sachs Internet			X										X							X											
SP	Fundalmental Investors					X								X													X					
SP	Investment Co. of America					X								X												X						
SP	Washington Mutual Inv. Fd				X									X									X									
SP	New Perspective Fd. Inc.					X								X													X					
SP	MFS Limited Maturity Fd.					X								X												X						
SP	VanKampen American U.S.				X									X												X						
SP	American Balanced Fund				X									X							X											
SP	Income Fund of America				X									X										X								
SP	Interpore International						X							X												X						
SP	Prudential IRA				X									X									X									
JT	Baird Money Market					X										X										X						
	Delaware County Bank				X									X								X										
	J & R Partnership					X											X				X											
	Baird Money Markets					X											X								X							

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SCHEDULE IV — TRANSACTIONS

Name John R. Kasich | Page ___ of ___

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–99		X								
	Northwestern Mutual Life Annuities (7)	X			payments per month	X									
	Northwestern Mutual Variable Annuities (2)	X			payments per month	X									
	First Capital Insured		X		7-1-99	X									
	Munder Funds NetNet Fd	X			7-1-99	X									
	Goldman Sachs Internet	X			7-1-99	X									

This page may be copied if more space is required.

Name	John R. Kasich	Page ___ of

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Estate of Elizabeth M. Stauch	Mortgage on Delaware County			X							
		property owned by J & R										
		Partnership										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source		Description	Value
Example:	Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name	John R. Kasich	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
member, board of directors	Concord Counseling, Columbus, Ohio

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOU
00 MAY 15 PM 3:
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(10)

HC

HAND DELIVERED

SUE W. KELLY
(Full Name)

187 JAY ST.
KATONAH, NY 10536
(Mailing Address)

Daytime Telephone 202-225-5441

Filer Status	[X] Member of the U.S. House of Representatives	State: NY District: 19	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Sue Kelly	5-15-00

Name	SUE W. KELLY	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	William A. Kelly + Co, Inc. Katonah, ny	Spouse Salary	NA
	87 Bedford Rd Corp., Katonah, ny	Spouse Salary	NA
	Conservation Industry Foundation, White Plains, ny	Spouse Salary	NA
	LMC Corporation, Logan, Utah	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Sue W Kelly | Page 3 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	AMER HOME PRODUCTS					X								X										X								
	AMER POWER CONVERSION						X							X							X											
	AMER INT'L GROUP					X								X								X										P
	BANK AMERICA					X								X											X							
	BP AMOCO						X							X											X							
	CISCO SYSTEMS							X						X							X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name SUE W. KELLY

Page 4 of 10

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	EXXON MOBIL				X									X									X									
	HARTE-HANKS				X									X								X										P
	INTEL CORP						X							X								X										
	SMITH KLINE				X									X									X									
	STATE STREET BANK						X							X										X								
	TIME WARNER					X								X								X										
	WASHINGTON MUTUAL					X								X										X								P
	DLJ MONEY MARKET						X									X									X							
	INTERPOOL, INC																															S
	NUSKIN ENTER.																															S
	TERAZO																															S
	101 N. MAIN - MT KISCO								X						X												X					
	36 ANDERSON - KATONAH							X							X											X						
	COVE RD - SOUTH SALEM, NY							X							X											X						
	COUNTRY BANK - CARMEL, NY			X												X						X										
	BANK OF NY - KATONAH NY			X												X							X									
	FED CREDIT UNION - WASH DC			X												X							X									
	10 WATER VIEW LT - S. SALEM							X							X										X							
JT	MERRILL LYNCH CMA				X											X								X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name SUE W KELLY

Page 5 of 10

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	FLEET BANK PER - KATONAH			X												X							X									
SP	MAIN PAC NAT BANK -			X												X							X									
SP	UNIM STATE BANK -			X												X							X									
SP	USAA Savings Per			X												X							X									
SP	MERRILL LYNCH CMA			X												X							X									
SP	MC DONALDS				X									X									X									
SP	RED REALTY - KATONAH							X							X									X								
SP	IRA - BREAN MURRAY - MG								X					X												X						S
SP	IRA - TUCKER Anthony - MG								X					X												X						P
SP	9 Waterview Lt - S. Salem							X									X				X											
SP	CENTRAL DIVER FIND PARK									X					X												X					
SP	105 Bedford Rd Katonah								X						X												X					
SP	87 BEDFORD Corp								X						X												X					
SP	BREAN MURRAY SECURITIES						X							X										X								S
SP	AMER HOME PRODUCTS				X									X								X										P
SP	AMGEN INC				X									X							X											P
SP	BUTLER MANF.				X									X								X										P
SP	GENERAL ELECTRIC				X									X								X										P
SP	HOUSE HOLDS				X									X								X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name SUE W. KELLY

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	PROXICOM, Inc			X										X							X											P
SP	FREEDOM CMA					X										X									X							P
SP	RIVERCITY-YONKERS							X							X													X				
SP	PELHAM COMMONS, Inc.				X												X				X											S
SP	NORTH SALEM CENTER						X										X				X											
SP	POINT ASSOCIATES - PARSKILL					X									X						X											
SP	POINT MARINA, PEEKSKILL				X										X						X											
SP	HEALTH CARE PROP - TEXAS							X							X						X											
SP	W. A. KELLY & CO, Inc								X								X				X											
SP	W. A. KELLY LEASE, Inc.							X									X				X											
SP	MISC LIFE INSURANCE				X															INSURANCE	X											
	LIFE INSURANCE ON S POUSE				X															INSURANCE	X											
	MASS MUTUAL LUS GOVT				X															INSURANCE	X											

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SCHEDULE IV — TRANSACTIONS

Name SUE W KELLY

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	AMER INT'L GROUP	X			7/30/99			X							
	HARTE-HANKS	X			5/19/99		X								
	WASHINGTON MUTUAL	X			7/22/99			X							
	TEXACO		X		3/4/99										
SP	IRA BREEN MURRAY - NYC		X		4/30/99						X				
	INTERPOOL, INC		X		9/24/99										
	NUSKIN ENTERPRISES		X		7/30/99										
SP	IRA TUCKER ANTHONY - NYC	X			4/30/99						X				
SP	BREEN MURRAY SECURITIES -		X		4/30/99				X						
SP	AMER HOME PRODUCTS	X			4/30/99	X									
SP	AMGEN INC	X			12/31/99	X									
SP	BUTLER MANUFACTURING	X			4/30/99	X									
SP	GENERAL ELECTRIC	X			4/30/99		X								
SP	HARTE HANKS	X			4/15/99	X									
SP	PROXICOM INC	X			12/31/99	X									
SP	FREEDOM CMA	X			4/30/99			X							

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Name SUE W. KELLY | Page 8 of 10

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	PELHAM COMMUNS, INC – PELHAM, NY		X		6/15/99	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP.	MANUFAC NAT BANK	MORTGAGE - CLOTH River Park						X				
SP	UNION STATE BANK - WHITE PLAINS	MORTGAGE - 87 BED RE Corp					X					
SP	LOAN FROM E.U. Colley - North Salem	JOINT } POINT ASSOC.						X				
SP	LOAN FROM Rich. McCay - BOSTON MA	mortgage } Health Care Inv.						X				

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Rambouillet, France / National Albanian American Council	2/11 - 2/14	New York, NY - Paris, France - New York NY	Y	Y	N	N
	Qatar / Qatar Ctr for Futuristic Studies	3/6 - 3/9	New York, NY - Qatar - New York NY	Y	Y	N	N
	Hershey, PA / The Aspen Institute	3/19 - 3/21	Wash. DC - Hershey PA	Y	Y	Y	N

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2449

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Patrick J. Kennedy
(Full Name)

1655 Douglas Avenue, Apt. 101
(Mailing Address)
North Providence RI 02904

Daytime Telephone: (202) 225-4911

Filer Status [X] Member of the U.S. House of Representatives — State RI District: 01 — [ ] Officer or Employee — Employing Office.

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS–Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Patrick J. Kennedy	5·11·00

Name Patrick J. Kennedy	Page 2 of 6

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None "	If other than one of the listed categories, specify the type of income by writing a brief description iin this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples* SP Mega Corp Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Citizens Trust Company Accounts, Providence, RI	$15,001 - $50,000	Interest	$1 - $200	
1784 Federal Institutional US Treasury Money Market Fund - BSD Boston, MA	None (disposed of during 1999)	Interest	$201 - $1,000	
Merrimac Treasury Plus Series Investment Class Money Market Fund Boston, MA	None (disposed of during 1999)	Interest	$201 - $1,000	
MFB Northern U.S. Government Money Market Fund Chicago, IL	$15,001 - $50,000	Dividends	$2,501 - $5,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Domini Social Index Fund (Mutual Fund) New York, NY	$15.001 - $50.000	Dividends	$1 - $200	P
	Dreyfus Third Century Fund (Mutual Fund) New York, NY	$15.001 - $50.000	Capital Gains and Dividends	$1.001 - $2.500	P
	T. Rowe Price Tax Free Income Fund (Mutual Fund) Baltimore, MD	$50.001 - $100.000	Dividends	$2.501 - $5.000	P
	Vanguard International Equity Index Fund (Mutual Fund) Valley Forge, PA	$50.001 - $100.000	Dividends	$1.001 - $2.500	P
	Vanguard Municipal Bond Fund (Mutual Fund) Valley Forge, PA	$50.001 - $100.000	Dividends	$1.001 - $2.500	P
	Friends of Patrick J. Kennedy - Loan Receivable (RI State Rep.)	$1.001 - $15.000	Interest	None	.
	March 4, 1953 Trust, Rose F. Kennedy, Grantor, FBO Edward M. Kennedy, New York, NY	.	Excepted Trust	$1.001 - $2.500	.
	August 31, 1959 Trust, Edward M. Kennedy, Grantor, FBO Patrick J. Kennedy, New York, NY	.	Excepted Trust	$15.001 - $50.000	.
	Arctic Royalty Limited Partnership (a limited partnership owning oil and gas royalty interests) New York, NY	$50.001 - $100.000	Partnership Income	$15.001 - $50.000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Domini Social Index Fund (page 3, item 1)	Purchase	4 Times on various dates throughout the year.	$15,001 - $50,000
	Dreyfus Third Century Fund (page 3, item 2)	Purchase	4 Times on various dates throughout the year.	$15,001 - $50,000
	Dreyfus Third Century Fund (page 3, item 2)	Purchase	Income reinvestment throughout year.	$1,001 - $15,000
	T. Rowe Price Tax Free Income Fund (page 3, item 3)	Purchase	5/7/99	$50,001 - $100,000
	T. Rowe Price Tax Free Income Fund (page 3, item 3)	Purchase	Income reinvestment throughout year.	$1,001 - $15,000
	Vanguard International Equity Index Fund (page 3, item 4)	Purchase	4 Times on various dates throughout the year.	$15,001 - $50,000
	Vanguard International Equity Index Fund (page 3, item 4)	Purchase	Income reinvestment throughout year.	$1,001 - $15,000
	Vanguard Municipal Bond Fund (page 3, item 5)	Purchase	5/6/99	$50,001 - $100,000
	Vanguard Municipal Bond Fund (page 3, item 5)	Purchase	Income reinvestment throughout year.	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	American Express Company, New York, NY	Credit Card	$15,001 - $50,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Corporate Member	Battleship, Massachusetts
Corporate Member	Bradley Hospital
Chairman	Democratic Congressional Campaign Committee
Vice Chairman	Independent World Commission on the Oceans
Member, Honorary Advisory Board	March of Dimes - Rhode Island
Honorary Member	Mental Health Association of Rhode Island
Member, Advisory Board	Big Brothers of Rhode Island
Member, Advisory Board	Music School
Member, Advisory Board	Rhode Island Special Olympics
Associate Trustee	Joseph P. Kennedy, Jr. Foundation
Limited Partner	Arctic Royalty Limited Partnership

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CAPITOL HILL MAIL RESPONSE CENTER
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Dale Edward Kildee (Full Name)
516 Kensington Ave (Mailing Address)
Flint MI 48503
202-225-3611 Daytime Telephone

HAND DELIVERED (4)
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives — State MI District 09	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dale E Kildee	May 14, 2000

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Name Dale Edward Kildee | Page 1 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Weichert, Realtors	Spouse commissions	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Dale Edward Kildee | Page 2 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, or E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X								X										X								P
			Simon & Schuster	Indefinite																	Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
JT	First Union Bank				X												X						X										
JT	Congressional Federal C.U.				X												X						X										
SP	Congressional Federal C.U. IRA				X												X					N/A											
SP	First Union Bank - SEP				X												X					N/A											
	Michigan Legislative Retirement (vested not receiving)							X									X					N/A											

For additional assets and unearned income, use next page.

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1-1-77	State of Michigan and self	life and health insurance

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 MAY 11 PM 4:33
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC
HAND DELIVERED (Office Use Only)
(5)

Carolyn Cheeks Kilpatrick
(Full Name)

7445 LaSalle Blvd., Detroit, Michigan 48206
(Mailing Address)

202/225-2261
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: Michigan District 15th	[ ] Officer or Employee	Employing Office:
Report Type*	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Carolyn C. Kilpatrick	5/11/2000

2459

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State ofMichigan(for services rendered prior to House employment and is not subject to outside earned income limit)	deferred compensation	$18,793.74

For payments to charity in lieu of honoraria, use Schedule II.

Name Kilpatrick | Page 3 of 5

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
Essence Communications	Article	Aug. 5, 1999	$800.00
K-Mart Kids Race Against Drugs	Appearance	Sept. 22, 1999	$500.00

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Name Kilpatrick

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X										X								P
	SP Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	Fidelity IRA (rolled over over from state of Michigan																															
	Legislative Retirement ~~SystemPention Plan)~~					X										X									N/A							
	Congressional Federal Credit Union Savings Account				X											X							X									
	National City Bank			X												X						X										

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Chisholm -Mingo Group	April 7-8	Wash.,D.C.-New York-Detroit	Y	Y	N	N
	Congressional Economic Leadership Institute	July 8-11	Detroit-San Diego- Detroit	Y	Y	N	N
	Annual CARIB News Multi-National Business Conference	Oct. 15-17	Virginia-St. Croix, U.S. Virgin Islands-Detroit	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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Ronald James Kind
(Full Name)

3061 Edgewater Lane, La Crosse, WI 54603
(Mailing Address)

608-779-9750
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives — State: Wisconsin District: 3rd	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? N/A	Yes ☐	No ☐
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ronald J. Kind	5/12/00

2464

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	US House of Representatives	Salary	136,700—
	State of Wisconsin – Director of State Courts	Spouse Salary	19,805—
	Self-employed Court Reporter	Spouse Salary	545—

For payments to charity in lieu of honoraria, use Schedule II.

Name Ronald James Kind | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
JT	Rental Property 219 Pearl Street, LaCrosse, WI					X									X										X							
SP	Putnam Inv - IRA			X										X									X									
	Wis. Def. Comp Program				X									X										X								
SP	Wis Def Comp Program				X									X										X								
	Investment Club - LaCrosse WI			X										X									X									
	Janus Fund-IRA			X										X										X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ronald James Kind

Page 4 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Janus Fund - Roth IRA			X										X											X							
SP	Janus Fund - Roth IRA			X										X											X							
	Govt. Thrift Plan				X									X												X						

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2467

Name Ronald James Kind | Page 5 of 6

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Norwest Bank, NA, LaCrosse, WI	Mortgage on Pearl Street,			X							

SCHEDULE VI — GIFTS None

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Director	Cooke Council on Alcohol, Section 501 (c)(3) organization
Director	Boys and Girls Club, Section 501 (c)(3) organization
Alumni Harvard Interviewer	Harvard University and Radcliffe University

SCHEDULE IX — AGREEMENTS N/A

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2000 82-753 (mec)

Use additional sheets if more space is required.

2470

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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Rep. Peter T. King
(Full Name)

1442 Roth Road
(Mailing Address)

Seaford, NY 11783

Daytime Telephone (202) 225-7896

Filer Status	[X] Member of the U S House of Representatives	State New York District 3rd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/8/00

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Nassau County, New York	Spouse Salary	NA
	New York State	Pension	$25,615

For payments to charity in lieu of honoraria, use Schedule II.

Name Rep. Peter T. King

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock					X								X									X									P
			Simon & Schuster		Indefinite																	Royalties								X				
			1st Bank of Paducah, KY accounts						X									X									X							
Jt	Chase Bank					X												X							X									

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Friends of Sinn Fein	May 6-10	NJ/Dublin, Ireland/NJ	Y	Y	Y	N
	University of Notre Dame	June 11-12	DC/South Bend, IN, NYC,NY	Y	Y	N	N

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PETER T. KING
Member of Congress
Third District, New York

403 CANNON BUILDING
WASHINGTON, DC 20515–3203
(202) 225–7896

1003 PARK BOULEVARD
MASSAPEQUA PARK, NY 11762
(516) 541–4225

peter.king@mail.house.gov
http://www.house.gov/king/

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COMMITTEE ON BANKING AND FINANCIAL SERVICES
CHAIRMAN
SUBCOMMITTEE ON GENERAL OVERSIGHT AND INVESTIGATIONS
COMMITTEE ON INTERNATIONAL RELATIONS

Congress of the United States
House of Representatives
Washington, DC 20515–3203

May 25, 2000

HAND DELIVERED

MC

Clerk, U.S. House of Representatives
Legislative Resource Center
B106 Cannon House Office Bldg
Washington, D.C. 20515-6612

Re: Financial Disclosure Statement for 1999

Dear Friend:

As per your discussion of today with my Chief of Staff, enclosed is a new Schedule III – Assets and "Unearned" Income and two copies thereof for 1999.

Thanks for your help.

All the best.

Sincerely,

Peter T. King

PETER T. KING
Member of Congress

PTK/cr

PRINTED ON RECYCLED PAPER

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A	Block B	Block C	Block D	Block E
SP, DC, JT	Examples	A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other: Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP	Mega Corp Stock	Indefinite	DIVIDENDS: X	IV: X	P
	Simon & Schuster		Royalties	IX: X	
JT	1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: X	
Jt	Chase Bank	C: X	INTEREST: X	III: X	
Sp	New York State Pension Program	C: X		I: X	

For additional assets and unearned income, use next page.

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2475

Name Rep. Peter T. King

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A	Block B	Block C	Block D	Block E
SP, DC, JT	*Examples:* SP Mega Corp Stock; Simon & Schuster; 1st Bank of Paducah, KY accounts	Indefinite	Royalties		P, S, E
Jt	Chase Bank	C: $1,001 – $15,000	INTEREST	VI: $5,001 – $15,000	P
Sp	New York State Pension Program	C: $1,001 – $15,000	INTEREST	I: None	S

Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000
Examples					X							
Chase Bank			X									
New York State Pension Program			X									

Block A	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000
Examples	X						Royalties				X					X		
Chase Bank			X							X								
New York State Pension Program								X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

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at close of reporting year.
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BLOCK D — Amount of Income

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BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None		I None	
		B $1 – $1,000		II $1 – $200	
		C $1,001 – $15,000		III $201 – $1,000	
		D $15,001 – $50,000		IV $1,001 – $2,500	
		E $50,001 – $100,000		V $2,501 – $5,000	
		F $100,001 – $250,000		VI $5,001 – $15,000	
		G $250,001 – $500,000		VII $15,001 – $50,000	
		H $500,001 – $1,000,000		VIII $50,001 – $100,000	
		I $1,000,001 – $5,000,000		IX $100,001 – $1,000,000	
		J $5,000,001 – $25,000,000		X $1,000,001 – $5,000,000	
		K $25,000,001 – $50,000,000		XI Over $5,000,000	
		L Over $50,000,000	DIVIDENDS		
			RENT		
			INTEREST		
			CAPITAL GAINS		
			EXCEPTED TRUST		
			QUALIFIED BLIND TRUST		
			Other Type of Income (Specify: For Example: Partnership Income or Farm Income)		
SP, DC, JT	*Examples* SP Mega Corp. Stock	Indefinite: X	X	X	P
	Simon & Schuster				
	1st Bank of Paducah, KY accounts	X	X	X	
	Royalties				
Jt	Chase Bank	X	X	X	P
Sp	New York State Pension Program	X		X	S
					E

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

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9

Jack Kingston
(Full Name)

1034 Longworth HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202/225-5831

Filer Status	[X] Member of the U.S. House of Representatives	State: GA District: 01	[ ] Officer or Employee	Employing Office:	A $200 penalty shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)		[ ] Amendment	[ ] Termination — Termination Date	

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**		X
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	X	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS-Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jack Kingston	5-15-00

2478

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	K Mart Family Foundation	Race	09/22/99	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples.* SP. Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Palmer & Cay/Carswell Stock	$1,000,001 - $5,000,000	Dividends	$1,001 - $2,500	S
Courtland Reserves MMA	$1,001 - $15,000	Interest	$201 - $1,000	
Savannah Food & Ind. Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
111 Jacqueline Dr/Savannah, GA	$50,001 - $100,000	Rent	$5,001 - $15,000	
5 Island Drive/Savannah, GA	$100,001 - $250,000	Rent	$5,001 - $15,000	
8424 Ferguson Ave/Savannah, GA	$15,001 - $50,000	Rent	$1,001 - $2,500	
108 18th St/Tybee, GA	$100,001 - $250,000	Rent	$5,001 - $15,000	

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

American Capitol Venture IRA	$15.001 - $50.000	Interest	None	
American Capitol Venture IRA	$15.001 - $50.000	Interest	None	
Roswell, GA G/O Dtd 6/1/88	$15.001 - $50.000	Interest	$201 - $1.000	
Gwinnett City, GA School District	$15.001 - $50.000	Interest	$201 - $1.000	
Putnam Municipal Stocks	$1.001 - $15.000	Interest	$201 - $1.000	
Cats Series S Zero Coupon Govt Bond Corporate Bonds	$1.001 - $15.000	Interest	$201 - $1.000	
Strips-TINT Govt Securities	$1.001 - $15.000	Interest	$201 - $1.000	
Europe Fund, Inc. Stock Fund Merrill Lynch	$1.001 - $15.000	Dividends	$201 - $1.000	
CATS Zero Coupon Bonds/M Lynch	$1.001 - $15.000	Interest	$201 - $1.000	
Global Income Fund-Bond (M Lynch)	$1.001 - $15.000	Interest	$201 - $1.000	
CATS Series A Coupon (I Johnson)	$15.001 - $50.000	Interest	$201 - $1.000	
TIGER Coupon Book	$1.001 - $15.000	Interest	$201 - $1.000	
Franklin Custodian Utility (Stock Mutual Fund-M Lynch)	$1.001 - $15.000	Dividends	$201 - $1.000	
CATS Zero Coupon Bonds	$1.001 - $15.000	Interest	None	
State of GA Retirement Plan	$1.001 - $15.000	N/A	None	
Palmer & Cay Carswell 401K	$250.001 - $500.000	Interest	None	
GA Develop Authority Municipal Bond-Marietta, GA	$1.001 - $15.000	Interest	$201 - $1.000	
STRIPS Zero Coupon Govt Bond	$1.001 - $15.000	Interest	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	CATS Zero Coupon Bond	$1.001 - $15.000	Interest	$201 - $1.000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Palmer & Cay/Carswell Stock	Sold	6/28/00	$250,001 - $500,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Mr Newman Hall, Madison, TN	Mortgage 111 Jacqueline Dr/Savannah, GA	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
GA Industry Association	6/11 - 12/99	Savh, GA-Amelia Island, FL & return	Y	Y	Y	None
Aspen Institute	3/19 - 21/99	DC-Hershey, PA	Y	Y	Y	None

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1/5/93	J Kingston & State of GA	Health Care Plan

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Jack Kingston
(Full Name)

1034 Longworth HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202/225-5831

Filer Status	[X] Member of the U.S. House of Representatives	State: GA District: 01	[ ] Officer or Employee — Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[ ]	[X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	[X]	[ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	[X]	[ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[X]	[ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	[X]	[ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[X]	[ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS-Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jack Kingston	6-12-00

2487

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP. Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP. 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
Palmer & Cay/Carswell Stock	$1,000,001 - $5,000,000	Capital Gains and Dividends	$100,001 - $1,000,000	S
Courtland Reserves MMA	$1,001 - $15,000	Interest	$201 - $1,000	
Imperial Holly (FORMERLY SAVANNAH FOODS + IND.)	$1,001 - $15,000	Dividends	$201 - $1,000	
111 Jacqueline Dr/Savannah, GA	$50,001 - $100,000	Rent	$5,001 - $15,000	
5 Island Drive/Savannah, GA	$100,001 - $250,000	Rent	$5,001 - $15,000	
8424 Ferguson Ave/Savannah, GA	$15,001 - $50,000	Rent	$1,001 - $2,500	
108 18th St/Tybee, GA	$100,001 - $250,000	Rent	$5,001 - $15,000	

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 4:27

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MAY 8 2000
(Office Use Only)

27

Gerald D. Kleczka
(Full Name)

3150A South 12th St
(Mailing Address)

Milwaukee WI 53215

Daytime Telephone: 414-297-1140

Filer Status	[X] Member of the U.S. House of Representatives	State: WI District: 04	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gerald D. Kleczka	May 1, 2000

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	George Washington University Primary Care Associates	Spouse Salary	NA
	Virginia Employment Commission	Spouse Unemployment Compensation	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	3262 S 9th St, Milwaukee, Rental	$50,001 - $100,000	Rent	$5,001 - $15,000	S
JT	Lincoln Savings Bank, Milwaukee	$1,001 - $15,000	Interest	$1 - $200	
JT	Congressional Fed Credit Union, DC	$1,001 - $15,000	Interest	$1 - $200	
JT	North Sore Bank, Milwaukee	$1,001 - $15,000	Interest	$1 - $200	
	Congressional Fed Credit Union, DC	$1,001 - $15,000	Interest	$1 - $200	
SP	Krupp, Insd Plus LP, IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	S
SP	Kaufmann Fund, IRA	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Dean Witter IRA (Attached)	$1,001 - $15,000	Dividends	$1 - $200	
	Dean Witter IRA	$50,001 - $100,000	Dividends	$1 - $200	S
	Dean Witter Nicholas Applegate Capital Management (attached)	$100,001 - $250,000	Capital Gains and Dividends	$15,001 - $50,000	
	Dean Witter Active Assets Acct	$15,001 - $50,000	Dividends	$1,001 - $2,500	
	Vanguard Index Trust	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	
SP	Legg Mason Value Trust	$15,001 - $50,000	Capital Gains and Dividends	$201 - $1,000	
	Marshall & Illsey Bank Stock	$100,001 - $250,000	Dividends	$1,001 - $2,500	
	Kohls Stock	$1,001 - $15,000	Dividends	None	
SP	Marisco Growth & Income Fund	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	
	Boeing Corp Stock	$1,001 - $15,000	Dividends	$1 - $200	S
	Compaq Computer Stock	$1,001 - $15,000	Dividends	$1 - $200	S
	Einstein/Noah Bagel Stock	$1 - $1,000	Dividends	None	S
	Motorola Inc., Stock	$1,001 - $15,000	Dividends	$1 - $200	S
	Toymax Intl. Inc., Stock	$1 - $1,000	Dividends	None	S
	Walgreen Co., Stock	$1,001 - $15,000	Dividends	$1 - $200	
	Harley Davidson Inc., Stock	$1,001 - $15,000	Dividends	$1 - $200	
	Wisconsin Retirement System	$100,001 - $250,000	Interest	NA	NA
SP	TIAA CREF Retirement Account	$50,001 - $100,000	Interest	NA	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Comp USA, Stock	$1,001 - $15,000	Dividends	None	P AND S
	Lowes Companies, Stock	$1,001 - $15,000	Dividends	$1 - $200	P AND S
	United Parcel Service, Stock	$1,001 - $15,000	Dividends	None	P AND S
	Merrill Lynch CMA Acct-Stocks (Attached)	$50,001 - $100,000	Dividends	$201 - $1,000 *	P
	Dell Computer Corp., Stock	$1,001 - $15,000	Dividends	None	P
	Firstar Corp., Stock	$1,001 - $15,000	Dividends	$1 - $200	P
	Home Depot, Stock	$1,001 - $15,000	Dividends	$1 - $200	P
	Oracle Corp., Stock	$1,001 - $15,000	Dividends	None	P
	Stamps.com, Stock	$1,001 - $15,000	Dividends	None	P
SP	Janus Grth&Inem Fund, IRA	$15,001 - $50,000	Capital Gains and Dividends	$1 - $200	P
	Janus Twenty Fund, IRA	$50,001 - $100,000	Capital Gains and Dividends	$1 - $200	P
	Janus Global Tech. Fund	$15,001 - $50,000	Capital Gains and Dividends	$1 - $200	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	3262 S 9th St, Milwaukee, Rental	Sold	6/30/99	$50,001 - $100,000
SP	Krupp, Insd Plus LP, IRA	Sold	5/26/99	$1,001 - $15,000
SP	Kaufmann Fund, IRA	Sold	7/29/99	$15,001 - $50,000
	Dean Witter, IRA	Sold	2/3/99	$50,001 - $100,000
	Boeing Corp., Stock	Sold	2/12/99	$1,001 - $15,000
	Compaq Computer Stock	Sold	4/16/99	$1,001 - $15,000
	Motorola Stock	Sold	4/16/99	$1,001 - $15,000
	Toymax Intl. Inc. Stock	Sold	4/1/99	$1,001 - $15,000
	CompUSA Stock	Purchase	2/18/99, 4/7/99	$1,001 - $15,000
	CompUSA Stock	Sold	12/8/99	$1,001 - $15,000
	Lowes Companies Stock	Purchase	7/19/99,8/31/99	$1,001 - $15,000
	Lowes Companies Stock	Sold	12/2/99	$1,001 - $15,000
	United Parcel Service	Purchase	11/9/99	$1,001 - $15,000
	United Parcel Service	Sold	11/10/99	$1,001 - $15,000
	Dean Witter Nicholas Applegate Capital Management (attached)	(attached)	(attached)	(attached)
	Merrill Lynch CMA Acct Stocks	Purchase	5/7/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Dell Computer Corp Stock	Purchase	4/21/99	$1,001 - $15,000
	Firstar Corp., Stock	Purchase	7/8/99, 12/13/99	$1,001 - $15,000
	Home Depot Stock	Purchase	7/16/99	$1,001 - $15,000
	Oracle Corp., Stock	Purchase	4/21/99	$1,001 - $15,000
	Stamps.com Stock	Purchase	6/25/99	$1,001 - $15,000
SP	Janus Grth & Incm Fund, IRA	Purchase	7/16/99	$1,001 - $15,000
	Janus Twenty Fund, IRA	Purchase	2/8/99	$50,001 - $100,000
	Janus Global Technology Fund	Purchase	7/14/99	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Lincoln Savings Bank, Milwaukee, WI	Mortgage/Rental	$15,001 - $50,000

Merrill Lynch

MERRILL LYNCH CMA® ACCOUNT

TOTAL ACCOUNT VALUE AS OF 12/31/1999 $73,086.00

GERALD D KLECZKA
4200 CHRISTINE PL
ALEXANDRIA VA 22311-1109

YOUR FINANCIAL CONSULTANT:
ROBERT B LOBBAN JR
FC# 2990
(703) 248-7500

Your Merrill Lynch Office:
4121 WILSON BLVD.
ARLINGTON VA 22182-2709

FOR CUSTOMER SERVICE QUESTIONS: 1-800-CMA-INFO (1-800-262-4636)

Monthly Portfolio Summary

Asset	11/26/99 Value	%	12/31/99 Value	%
Cash/Money Funds			6,948	10
CD's/Equivalents				
Government Securities				
Corporate Bonds				
Municipal Bonds				
Equities			66,138	90
Mutual Funds				
Options				
Other				
Long Market Value			73,086	
Short Market Value				
Estimated Accrued Interest				
Debit Balance				
Net Portfolio Value			73,086	

Income Summary

	This Statement	Year-to-Date
Money Fund Dividends	37.01	37.01
Tax-Exempt CMA Funds		
Tax-Exempt Interest		
Reportable Interest		
Reportable Dividends		
Income Not Reported		
Total	37.01	37.01

Items for Attention

Security	Message	Date
	No Items For Attention	

Purchasing Power 6,948 Investor Credit Line

NEWS

The 2000 Collective Wisdom Portfolios. Merrill Lynch's global research team has introduced the U.S. and International Collective Wisdom Portfolios, comprised of their top stock ideas for the year ahead. For more information and to get our 20 pg. report contact your Financial Consultant, log on to MLOL or call 1-800-Merrill ext. 4576.

Financial Market Indicators

	This Statement	Last Statement	Previous Year-End
Dow Jones Industrial Average	11497.12	10877.81	9181.43
Three-Month Treasury Bills	5.31%	5.29%	4.45%
Long-Term Treasury Bonds	6.47%	6.28%	5.09%

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Merrill Lynch

MERRILL LYNCH CMA® ACCOUNT

GERALD D KLECZKA

Current Portfolio

Quantity		Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Curre Yiel %
		Equities										
120	**	AMERICA ONLINE INC DEL	AOL		05/06/99	62.66	7,520	75.87	9,105	1,585		
130	**	CISCO SYSTEMS INC COM	CSCO		05/06/99	54.51	7,087	107.12	13,926	6,839		
175	**	DELL COMPUTER CORP	DELL		05/06/99	41.01	7,177	51.00	8,925	1,748		
80		MCI WORLDCOM INC PV$0.01	WCOM		05/13/99	88.25	7,060	53.06	4,244	N/A		
40	@	MCI WORLDCOM INC			N/A	N/A	N/A	53.06	2,122	N/A		
		DIVIDEND PENDING 01/05										
120		Security Sub-Total					7,060		6,367	N/A		
90	**	MICROSOFT CORP	MSFT		05/06/99	81.01	7,291	116.75	10,507	3,216		
40	**	YAHOO INC CAL PV$0.00017	YHOO		05/13/99	171.50	6,860	432.68	17,307	10,447		
		Total Equities					42,995		66,138	23,835		
		Total of Long Portfolio					49,943*		73,086	23,835 *	365	.

* - Excludes N/A items

@ - These shares result from a stock dividend or split and will be payable to your account on the date shown. The market price has been changed to reflect that dividend or split. The unit cost will be adjusted on the payable-date.

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
842 119411 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	395.27	---	---
ACTIVE ASSETS INSURED ACCOUNT	6,015.75	4.1%	288
Total Cash and Money Market Funds	[illegible]	[illegible]	[illegible]

Net Change Since January 1, 1999 [illegible]

Annualized 30 Day Yields

Active Assets Money Trust	5.39%
Active Assets Govt. Sec. Tr.	5.05%
Active Assets California Tax Free	2.76%
Active Assets Tax Free Trust	3.22%
Active Assets Insured Account	4.80%
Active Assets Deposit Account	4.80%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
15	ABGENIX INC	132 1/2	1,987.50	1.4%	0	0.00%	ABGX	
29	AES CORP	74 3/4	2,167.75	1.5%	0	0.00%	AES	
42	ALLERGAN INC	49 3/4	2,089.50	1.4%	11	.56%	AGN	Next Dividend Payable 03/00
68	AMERICAN TOWER CP CLASS A	30 9/16	2,078.25	1.4%	0	0.00%	AMT	
28	AMFM INC	78 1/4	2,191.00	1.5%	0	0.00%	AFM	
26	APACHE CORP	36 15/16	960.37	0.7%	7	.75%	APA	Next Dividend Payable 01/31/00
10	ART TECHNOLOGY GROUP INC	128 1/8	1,281.25	0.9%	0	0.00%	ARTG	
55	ASPECT COMMUNICATIONS	39 1/8	2,151.87	1.5%	0	0.00%	ASPT	
44	BEA SYSTEMS INC	69 15/16	3,077.25	2.1%	0	0.00%	BEAS	
13	BIOGEN INC MASS	84 1/2	1,098.50	0.8%	0	0.00%	BGEN	
6	BROADCOM CORP CL A	272 3/8	1,634.25	1.1%	0	0.00%	BRCM	
6	CELAERA GENOMICS GROUP	149	894.00	0.6%	0	0.00%	CRA	
29	CHARTERED SEMICONDUCTOR ADS	73	2,117.00	1.5%	0	0.00%	CHRT	
14	CIENA CORPORATION	57 1/2	805.00	0.6%	0	0.00%	CIEN	
22	CITRIX SYSTEMS INC	123	2,706.00	1.9%	0	0.00%	CTXS	
17	CLARENT CORP	77 3/4	1,321.75	0.9%	0	0.00%	CLRN	
16	CMGI INC	276 7/8	4,430.00	3.1%	0	0.00%	CMGI	
47	COMMSCOPE INC	40 5/16	1,894.68	1.3%	0	0.00%	CTV	
18	CONVERSE TECHNOLOGY INC	144 3/4	2,605.50	1.8%	0	0.00%	CNVT	
57	CONCORD EFS INC	25 3/4	1,467.75	1.0%	0	0.00%	CEFT	
20	CONEXANT SYSTEMS INC	66 3/8	1,327.50	0.9%	0	0.00%	CNXT	
26	CORNING INC	128 15/16	3,352.37	2.3%	18	.55%	GLW	Next Dividend Payable 03/00
19	COSTCO WHOLSALE CORP	91 1/4	1,733.75	1.2%	0	0.00%	COST	
23	COVAD COMMUNICATIONS GROUP	55 15/16	1,286.56	0.9%	0	0.00%	COVD	
54	CYPRESS SEMICONDUCTOR DELA	32 3/8	1,748.25	1.2%	0	0.00%	CY	
11	DOUBLECLICK INC	253 1/16	2,783.68	1.9%	0	0.00%	DCLK	
20	ECHOSTAR COMM CORP CL A	97 1/2	1,950.00	1.4%	0	0.00%	DISH	
10	EMULEX CORP	112 1/2	1,125.00	0.8%	0	0.00%	EMLX	
37	ESPEED INC CL A	35 9/16	1,315.81	0.9%	0	0.00%	ESPD	
32	EXODUS COMMUNICATIONS INC	88 15/16	2,842.00	2.0%	0	0.00%	EXDS	

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
642 119411 022

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
36	FLEXTRONICS INTL LTD	46	1,656.00	1.1%	0	0.00%	FLEX	
20	GEMSTAR INTL GP INC	71 1/4	1,425.00	1.0%	0	0.00%	GHST	
18	GENENTECH INC	134 1/2	2,421.00	1.7%	0	0.00%	DNA	
17	HARLEY DAVIDSON INC	64 1/16	1,089.06	0.8%	3	.28%	HDI	Next Dividend Payable 03/00
22	INTERNET CAPITAL GROUP INC	170	3,740.00	2.6%	0	0.00%	ICGE	
24	INTUIT INC	59 15/16	1,438.50	1.0%	0	0.00%	INTU	
12	JDS UNIPHASE CORP	161 5/16	1,935.75	1.3%	0	0.00%	JDSU	
12	JDS UNIPHASE CORP	161 5/16	1,935.75	1.3%	0	0.00%	JDSU	Pending Stock Distribution
3	JUNIPER NETWORKS	340	1,020.00	0.7%	0	0.00%	JNPR	
50	KNIGHT / TRIMARK GROUP INC A	46	1,380.00	1.0%	0	0.00%	NITE	
21	LAM RESEARCH CORPORATION	111 9/16	2,342.81	1.6%	0	0.00%	LRCX	
16	LINEAR TECHNOLOGY CORPORATION	71 9/16	1,145.00	0.8%	2	.22%	LLTC	Next Dividend Payable 02/00
14	MEDIMMUNE INC	165 7/8	2,322.25	1.6%	0	0.00%	MEDI	
22	MERCURY INTERACTIVE CORP	107 15/16	2,374.62	1.6%	0	0.00%	MERQ	
52	MGM GRAND INC	50 5/16	1,610.00	1.1%	25	1.59%	MGG	
20	NEXTEL COMMUNICATIONS INC CL A	103 1/8	2,062.50	1.4%	0	0.00%	NXTL	
19	OMNICOM GROUP	100	1,900.00	1.3%	13	.70%	OMC	Next Dividend Payable 01/06/00
26	PE CORP PE BIOSYS GP	120 5/16	3,128.12	2.2%	8	.28%	PEB	Next Dividend Payable 01/03/00
10	PMC SIERRA INC	160 5/16	1,603.12	1.1%	0	0.00%	PMCS	
46	QWEST COMMUNICATIONS INTL INC	43	1,978.00	1.4%	0	0.00%	QWST	
15	REAL NETWORKS INC	120 5/16	1,804.68	1.2%	0	0.00%	RNWK	
100	ROWAN COMPANIES INC	21 11/16	2,168.75	1.5%	0	0.00%	ROC	
10	SAFEGUARD SCIENTIFICS	163	1,630.00	1.1%	0	0.00%	SFE	
16	SAPIENT CORP	140 15/16	2,255.00	1.6%	0	0.00%	SAPE	
55	SMURFIT STONE CONTAINER CP NEW	24 1/2	1,347.50	0.9%	0	0.00%	SSCC	
14	SOLECTRON CP	95 1/8	1,331.75	0.9%	0	0.00%	SLR	
4	SYCAMORE NETWORKS INC	308	1,232.00	0.9%	0	0.00%	SCHR	
24	SYMANTEC CORP	58 5/8	1,407.00	1.0%	0	0.00%	SYMC	
29	SYSCO CORP	39 9/16	1,147.31	0.8%	13	1.21%	SYY	Next Dividend Payable 01/00
19	TERADYNE INC	66	1,254.00	0.9%	0	0.00%	TER	
53	TIDEWATER INC	36	1,908.00	1.3%	31	1.66%	TDW	Next Dividend Payable 03/00
25	TIFFANY & COMPANY NEW	89 1/4	2,231.25	1.5%	6	.26%	TIF	Next Dividend Payable 01/10/00
35	TRIBUNE CO DELAWARE NEW	55 1/16	1,927.18	1.3%	12	.65%	TRB	Next Dividend Payable 03/00
27	UNIVISION COMM INC CLASS A	102 3/16	2,759.06	1.9%	0	0.00%	UVN	
20	USWEB CORP	44 7/16	888.75	0.6%	0	0.00%	USWB	
18	VALASSIS COMMUNICATIONS INC	42 1/4	760.50	0.5%	0	0.00%	VCI	
6	VERISIGN INC	190 15/16	1,145.62	0.8%	0	0.00%	VRSN	
25	VERITAS SOFTWARE DE	143 1/8	3,578.12	2.5%	0	0.00%	VRTS	
55	VISHAY INTERTECHNOLOGY INC	31 5/8	1,739.37	1.2%	0	0.00%	VSH	
18	VITESSE SEMICONDUCTORS	52 7/16	943.87	0.7%	0	0.00%	VTSS	
33	VOICE STREAM WIRELESS CORP	142 5/16	4,696.31	3.3%	0	0.00%	VSTR	
15	XILINX INC	45 15/32	682.03	0.5%	0	0.00%	XLNX	
15	XILINX INC	45 15/32	682.03	0.5%	0	0.00%	XLNX	Pending Stock Distribution
26	XIRCOM INC	75	1,950.00	1.4%	0	0.00%	XIRC	

2500

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number 642 119411 FA 022

Stocks	Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Total Stocks		$138,401.65	95.9%	$155	.11%		

Net Change Since January 1, 1999 -7,596.42

Asset Summary	Value	Est Yrly Income
Total Asset Value	$144,812.67	$444

Total Net Change In Priced Assets Since January 1, 1999 -7,596.42

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Activity	Description	Amount	Income Category
Taxable Interest	ACTIVE ASSETS INSURED ACCOUNT	263.70	Money Market Funds
Dividend	ADOLPH COORS CO CLASS B	12.02	Stocks
Dividend	AK STEEL HOLDING CORP	9.76	Stocks
Dividend	ALLEGIANCE CORPORATION	3.57	Stocks
Dividend	ALLERGAN INC	15.44	Stocks
Dividend	APACHE CORP	3.99	Stocks
Dividend	ASHLAND INCORPORATED	9.63	Stocks
Dividend	AVERY DENNISON CORPORATION	2.64	Stocks
Dividend	BEAR STEARNS COMPANIES INC	11.40	Stocks
Dividend	CAPITAL ONE FINANCIAL CORP	2.43	Stocks
Dividend	CARDINAL HEALTH INC	1.05	Stocks
Dividend	CARLISLE CO INC	7.04	Stocks
Dividend	CENTEX CORP	1.92	Stocks
Dividend	CHARLES SCHWAB NEW	.42	Stocks
Dividend	COASTAL CORP	2.25	Stocks
Dividend	COMCAST SPL A	1.12	Stocks
Dividend	CORNING INC	14.04	Stocks
Dividend	COUNTRYWIDE CREDIT INDS DEL	7.56	Stocks
Dividend	DANAHER CORP	1.50	Stocks
Dividend	DARDEN RESTAURANTS	4.16	Stocks
Dividend	DIME BANCORP INC NEW	3.20	Stocks
Dividend	EARTHGRAINS CO	1.76	Stocks
Dividend	FAMILY DOLLAR STORES	12.38	Stocks
Dividend	FIRST AMERICAN FINL CORP	9.00	Stocks
Dividend	GEORGIA-PAC (GEORGIA PAC GP)	9.00	Stocks

2501

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT

FOR MONTH ENDING DECEMBER 31, 1999

Your Financial Advisor
MR PEAR/MR HANDO
MORGAN STANLEY DEAN WITTER
1775 EYE STREET, NW SUITE 200
WASHINGTON, DC 20006
(202) 862-9000

Account Number FA
642 127434 022

Date of Birth
September 21, 1953

BONNIE L KLECZKA
4200 CHRISTINE PLACE
ALEXANDRIA VA 22311 1109

IRA Rollover
Dated 01/27/97

2502

Asset Summary

	Value	% of Asset
Money Market Funds	$285.43	2.1%
Stocks	8,993.75	67.0
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	4,143.55	30.9
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$13,422.73	100.0%
Cash	0.00	
Total Asset Value	$13,422.73	

Income Summary

	This Month	Year To Date
Money Market Funds	$1.24	$44.61
Stocks	0.00	2.50
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	0.00
Government Securities	0.00	0.00
Mutual Funds	0.00	0.00
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	524.72
Total Income	$1.24	$571.83

Activity Summary

Total Asset Value October 31 1999		$8,919.04
Cash/Money Market Activity		
Closing Balance 10/31	$283.06	
Credits To Your Account		
Dividends and Interest	2.37	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	20.01	
Total Credits	22.38	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	-20.01	
Other Debits	0.00	
Total Debits	-20.01	
Closing Balance 12/31	285.43	
Net Change Cash/Money Market Activity		2.37
Changes in Asset Value		
Value of Priced Assets 10/31	$8,635.98	
Securities Bought	20.01	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	4,481.31	
Value of Priced Assets 12/31	13,137.30	
Net Change In Asset Value		4,501.32
Total Asset Value as of December 31 1999		$13,422.73

BONNIE L KLECZKA
4200 CHRISTINE PLACE

Account Number FA
642 127434 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
MSDW LIQUID ASSET FUND	285.43	2.1%	15
Total Cash and Money Market Funds	$285.43	2.1%	$15
Net Change Since Last Statement	$2.37		

Annualized 30 Day Yields	
MSDW Liquid Asset Fund	5.29%
MSDW US Gvt Mymkt	4.84%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
200	LASER VISION CTRS	10 9/16	2,112.50	15.8%	0	0.00%	LVCI	
100	VARI-L CO INC	34 1/4	3,425.00	25.5%	0	0.00%	VARL	
50	WAL MART STORES INC	69 1/8	3,456.25	25.7%	10	.28%	WMT	Next Dividend Payable 01/10/00
Total Stocks			$8,993.75	67.0%	$10	.11%		
Net Change Since Last Statement			$3,437.50					

Mutual Funds		Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Other Mutual Funds									
64.291	MFS EMERGING GROWTH FUND B	64.4500	4,143.55	30.9%	N/A	N/A		MEGBX	Reinv/Reinv
Total Mutual Funds			$4,143.55	30.9%	N/A	N/A			
Net Change Since Last Statement			$1,063.82						

Asset Summary	Value	Est Yrly Income
Total Asset Value	$13,422.73	$25
Total Net Change In Priced Assets Since Last Statement	$4,501.32	

2503

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number 642 119411 FA 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
05-27	Sold	13	ADOLPH COORS CO CLASS B	50.1081	651.38	
07-26	Sold	9	ADOLPH COORS CO CLASS B	48.5438	436.87	
11-30	Sold	11	ADOLPH COORS CO CLASS B	52	571.98	
04-12	Sold	38	AIRBORNE FREIGHT DEL	32	1,215.95	
04-28	Sold	8	AK STEEL HOLDING CORP	26.6250	212.99	
09-08	Sold	35	AK STEEL HOLDING CORP	21.0065	735.20	
02-04	Tender	68	ALLEGIANCE CORPORATION			EXCHANGE
04-28	Sold	12	ALLERGAN INC	87.8750	1,054.46	
03-08	Sold	30	ALTERA CP	51.5475	1,546.37	
06-30	Sold	39	ALZA CP COM	49.9178	1,946.72	
02-11	Sold	5	AMAZON COM INC	108.5554	542.76	
04-28	Sold	37	AMDOCS LIMITED ORD	27.1250	1,003.59	
10-06	Sold	59	AMDOCS LIMITED ORD	20 4/16	1,194.71	
09-09	Sold	85	AMER POWER CONVER	18.1875	1,545.88	
01-06	Sold	25	AMERICA ONLINE INC	147.2754	3,681.76	
01-08	Sold	23	AMERICA ONLINE INC	149.2500	3,432.63	
11-10	Sold	19	AMERICAN EAGLE OUTFITTERS NEW	39.8668	757.44	
04-28	Sold	9	ANDRX CORPORATION	72.6875	654.16	
06-15	Sold	19	ANDRX CORPORATION	64.8384	1,231.88	
10-06	Sold	7	ANDRX CORPORATION	55.0541	385.36	
10-08	Sold	12	ANDRX CORPORATION	40.7430	488.90	
04-28	Sold	19	ANN TAYLOR STORES CORPORATION	50.7500	964.21	
08-09	Sold	39	ANN TAYLOR STORES CORPORATION	36	1,403.95	
09-24	Sold	19	APACHE CORP	41.4313	787.16	
03-03	Sold	72	APPLE COMPUTER INC	35.6077	2,563.66	
03-09	Sold	35	ASHLAND INCORPORATED	42.0539	1,471.84	
06-02	Sold		AT HOME CORPORATION		51.51	CASH IN LIEU OF FRACTIONS
06-21	Sold	11	AT HOME CORPORATION	88.3827	972.17	
10-08	Sold	11	AVERY DENNISON CORPORATION	53.2500	585.73	
11-17	Sold	20	BEA SYSTEMS INC	66.2458	1,324.87	
12-16	Sold	7	BEA SYSTEMS INC	122.2798	855.93	
04-28	Sold	14	BEAR STEARNS COMPANIES INC	49.3750	691.22	
05-28	Sold	32	BEAR STEARNS COMPANIES INC	41.2017	1,318.40	
04-28	Sold	14	BED BATH & BEYOND INC	37.5000	524.98	
09-22	Sold	36	BED BATH & BEYOND INC	28.4658	1,024.73	
03-31	Sold	12	BEST BUY CO	50	599.98	
04-22	Sold	12	BEST BUY CO	46.9056	562.85	
04-28	Sold	14	BEST BUY CO	51.6250	722.72	
06-01	Sold	10	BEST BUY CO	42.6416	426.40	
11-16	Sold	8	BEST BUY CO	49.0352	392.26	
12-13	Sold	16	BEST BUY CO	50.0334	800.50	
04-28	Sold	11	BIOGEN INC MASS	105.3750	1,159.09	
10-06	Sold	5	BIOGEN INC MASS	78.1641	390.80	
10-18	Sold	12	BIOGEN INC MASS	77.0119	924.10	

2504

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
842 119411 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
02-08	Sold	58	BLYTH INDUSTRIES INC	26	1,507.94	
01-08	Sold	25	BMC SOFTWARE	42.4024	1,060.02	
07-28	Sold	13	BMC SOFTWARE	50.1775	652.28	
10-25	Sold	17	BMC SOFTWARE	59.3048	1,008.14	
10-29	Sold	15	BMC SOFTWARE	57.0212	855.29	
09-27	Sold	3	BROADCOM CORP CL A	114.1250	342.36	
12-03	Sold	4	BROADCOM CORP CL A	179.0044	715.99	
07-20	Sold	23	CAPITAL ONE FINANCIAL CORP	47.8146	1,099.70	
09-08	Sold	10	CAPITAL ONE FINANCIAL CORP	37.1211	371.19	
12-29	Sold	15	CAPITAL ONE FINANCIAL CORP	46.2500	693.72	
02-04	Sold		CARDINAL HEALTH INC		25.86	CASH IN LIEU OF FRACTIONS
04-13	Sold	17	CARDINAL HEALTH INC	60	1,019.96	
04-28	Sold	8	CARDINAL HEALTH INC	65.6250	524.98	
05-03	Sold	17	CARDINAL HEALTH INC	63.4564	1,078.72	
04-21	Sold	44	CARLISLE CO INC	45.3541	1,995.51	
10-22	Sold	27	CBT GROUP PLC ADR	17.1443	462.88	
03-10	Sold	48	CENTEX CORP	36.4890	1,751.41	
04-28	Sold	11	CHARLES SCHWAB NEW	119.1250	1,310.33	
06-21	Sold	5	CHARLES SCHWAB NEW	89.0415	445.19	TRADE CARRIES STOCK DISTRIB.
07-26	Sold	20	CHARLES SCHWAB NEW	47.0947	941.85	
12-10	Sold	37	CIRCUIT CY STRS CIRCUIT CY GP	43.0151	1,591.50	
04-28	Sold	21	CITRIX SYSTEMS INC	38.3750	805.85	
05-24	Sold	20	CITRIX SYSTEMS INC	45.8416	916.79	
07-23	Sold	13	CITRIX SYSTEMS INC	55.6325	723.19	
04-21	Sold	4	CMGI INC	257.3931	1,029.53	
09-23	Sold	10	COASTAL CORP	42 14/16	428.73	
12-13	Sold	26	COASTAL CORP	34.1052	886.71	
04-28	Sold	17	COMAIR HOLDINGS	23.8750	405.86	
05-07	Sold	43	COMAIR HOLDINGS	22 3/8	962.09	
02-05	Sold	50	COMCAST CORPORATION CLASS A	62.1000	3,104.89	
04-22	Sold	18	COMCAST SPL A	60.3237	1,085.79	
04-28	Sold	12	COMCAST SPL A	68.2500	818.97	
06-18	Sold	16	COMCAST SPL A	35.6371	570.17	
07-06	Sold	20	COMCAST SPL A	39.9871	799.71	
01-26	Sold	16	COMPUWARE CORP	65.1423	1,042.24	
02-08	Sold	16	COMPUWARE CORP	65.0067	1,040.07	
01-15	Sold	11	COMVERSE TECHNOLOGY INC	75.5000	830.47	
04-28	Sold	17	COMVERSE TECHNOLOGY INC	64.6250	1,098.59	
07-27	Sold	8	COMVERSE TECHNOLOGY INC	76.9968	615.94	
09-29	Sold	5	CONEXANT SYSTEMS INC	75.0014	374.99	TRADE CARRIES STOCK DISTRIB.
12-07	Sold	16	CONEXANT SYSTEMS INC	61.1857	978.93	
04-28	Sold	10	CORNING INC	60.2500	602.48	
04-28	Sold	13	COUNTRYWIDE CREDIT INDS DEL	46.6250	606.10	
05-07	Sold	29	COUNTRYWIDE CREDIT INDS DEL	42.4740	1,231.70	

2505

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
642 119411 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
01-08	Sold	18	DANAHER CORP	53 13/16	968.59	
02-05	Sold	13	DANAHER CORP	51.1250	664.60	
05-05	Sold	8	DANAHER CORP	66.1875	529.48	
08-06	Sold	13	DANAHER CORP	55.4572	720.91	
01-19	Sold	58	DARDEN RESTAURANTS	17.9049	1,038.44	
04-28	Sold	35	DARDEN RESTAURANTS	21.8750	765.60	
08-06	Sold	69	DARDEN RESTAURANTS	20.3020	1,400.79	
04-16	Sold	64	DIME BANCORP INC NEW	23.1485	1,481.45	
11-10	Sold	23	DOLLAR GENERAL CORPORATION	27	620.97	
11-16	Sold	30	DOLLAR GENERAL CORPORATION	26.2017	786.02	
08-16	Sold	40	E TRADE GRP INC	22.7192	908.73	
03-10	Sold	44	EARTHGRAINS CO	23.2535	1,023.11	
07-12	Sold	17	ELECTR DATA SYSTEMS CORP	56.9693	968.44	
04-28	Sold	20	ELECTRONICS FOR IMAGING INC	46.1250	922.46	
10-22	Sold	23	ELECTRONICS FOR IMAGING INC	37.2775	857.35	
11-01	Sold	15	ELECTRONICS FOR IMAGING INC	39.4151	591.21	
12-16	Sold	23	ESTEE LAUDER COMPANIES INC A	41.0587	944.31	
06-02	Tender	11	EXCITE INC			EXCHANGE
10-14	Sold	8	EXODUS COMMUNICATIONS INC	70.0464	560.35	
02-04	Sold	75	FAMILY DOLLAR STORES	18.8875	1,416.51	
04-28	Sold	20	FAMILY DOLLAR STORES	23.4375	468.73	
08-09	Sold	49	FAMILY DOLLAR STORES	21.2698	1,042.18	
04-07	Sold	75	FIRST AMERICAN FINL CORP	16	1,199.96	
04-28	Sold	19	FLEXTRONICS INTL LTD	47.9375	910.77	
09-22	Sold	19	FLEXTRONICS INTL LTD	59.1209	1,123.26	
10-04	Sold	18	FOREST LABORATORIES	42.7936	770.25	
10-12	Sold	18	FOREST LABORATORIES	42.9940	773.86	
04-28	Sold	27	FOX ENTMT GROUP INC CLASS A	26.1875	707.03	
07-07	Sold	56	FOX ENTMT GROUP INC CLASS A	26.0271	1,457.47	
09-29	Sold	8	GATEWAY INC	42	335.98	
12-10	Sold	22	GATEWAY INC	67.1356	1,476.93	
04-28	Sold	8	GENENTECH INC (NEW)	86.7500	693.97	
06-08	Sold	16	GENENTECH INC (NEW)	82.1250	1,313.95	
03-26	Sold	33	GENL INSTR CORP DELA	28.8409	951.71	
04-28	Sold	9	GENL INSTR CORP DELA	36.5625	329.04	
09-28	Sold	20	GENL INSTR CORP DELA	45	899.97	
09-07	Sold	48	GENTEX CP	19.1062	917.06	
08-31	Sold	36	GEORGIA-PAC (GEORGIA PAC GP)	42.8938	1,544.12	
11-09	Sold	6	GILEAD SCIENCE	48.0455	288.26	
11-16	Sold	8	GILEAD SCIENCE	46.4350	371.46	
04-22	Sold	12	GUIDANT CORP	55 4/16	662.97	
04-28	Sold	21	GUIDANT CORP	60.1250	1,262.58	
05-25	Sold	11	GUIDANT CORP	47.5459	522.98	
07-13	Sold	14	GUIDANT CORP	52.6221	736.68	

2506

THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
642 119411 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-26	Sold	26	GULFSTREAM AEROSPACE CP NEW	41.9735	1,091.27	
04-15	Sold	20	GULFSTREAM AEROSPACE CP NEW	42.8775	857.52	
04-28	Sold	8	HALLIBURTON CO HLDG CO	41.8125	334.48	
07-13	Sold	33	HALLIBURTON CO HLDG CO	45 4/16	1,493.20	
08-20	Sold	24	HALLIBURTON CO HLDG CO	48.4966	1,163.88	
07-12	Sold	22	HASBRO INC	26.3712	580.15	
04-28	Sold	33	HEALTH MGMT ASSOC CL A	15.8125	521.79	
05-05	Sold	9	HEALTH MGMT ASSOC CL A	15.6250	140.62	
05-26	Sold	46	HEALTH MGMT ASSOC CL A	13.2364	608.84	
06-09	Sold	37	HEALTH MGMT ASSOC CL A	13.7837	509.98	
02-04	Sold	23	HERTZ CORPORATION A	43.7500	1,006.21	
07-29	Sold	17	HERTZ CORPORATION A	52	883.97	
10-15	Sold	7	I D E C PHARMACEUTICALS	108.7500	761.22	
12-09	Sold	7	I D E C PHARMACEUTICALS	117.7763	824.40	
04-28	Sold	13	INGERSOLL RAND	66.1875	860.41	
07-19	Sold	11	INGERSOLL RAND	61	670.97	
07-23	Sold	17	INGERSOLL RAND	62.1464	1,056.45	
10-27	Sold	7	INKTOMI CRP	102.1833	715.25	
11-17	Sold	3	INTERNET CAPITAL GROUP INC	164.5260	493.56	
11-16	Sold	24	INTIMATE BRANDS INC	38.5146	924.31	
12-02	Sold	5	INTUIT INC	54.3442	271.71	
12-27	Sold	10	INTUIT INC	54.6478	546.46	
09-29	Sold	9	JDS UNIPHASE CORP	106.9411	962.43	
04-28	Sold	25	JONES APPAREL GRP INC	31.3750	784.35	
09-02	Sold	41	JONES APPAREL GRP INC	25.3381	1,038.82	
11-23	Sold	56	JONES APPAREL GRP INC	26.9889	1,511.32	
12-16	Sold	3	JUNIPER NETWORKS	336.1927	1,008.54	
04-23	Sold	22	KEEBLER FOODS COMPANY	31.8750	701.22	
05-05	Sold	35	KEEBLER FOODS COMPANY	31.9375	1,117.77	
05-28	Sold	17	KNIGHT / TRIMARK GROUP INC	57.9728	985.50	
08-13	Sold	9	KNIGHT / TRIMARK GROUP INC	28.3444	255.09	
03-12	Sold	17	LAFARGE	30.0209	510.34	
03-31	Sold	39	LEGATO SYSTEMS INC	51.2083	1,997.05	
03-10	Sold	30	LEVEL ONE COMMUNICATIONS INC	47.1250	1,413.70	
03-10	Sold	13	LEXMARK INTL GROUP INC A	92.1198	1,197.52	
04-28	Sold	10	LEXMARK INTL GROUP INC A	118.3750	1,183.71	
06-08	Sold	3	LEXMARK INTL GROUP INC A	130.5816	391.72	TRADE CARRIES STOCK DISTRIB.
10-13	Sold	6	LEXMARK INTL GROUP INC A	100	599.98	
12-09	Sold	13	LEXMARK INTL GROUP INC A	78.8515	1,025.03	
12-16	Sold	8	LEXMARK INTL GROUP INC A	73 2/16	584.98	
01-08	Sold	7	LINCOLN NTL CORP IND	82.8125	579.67	
08-10	Sold	11	LINEAR TECHNOLOGY CORPORATION	56.3284	619.58	
12-17	Sold	8	LINEAR TECHNOLOGY CORPORATION	65.8750	526.98	
10-04	Sold	20	LIZ CLAIBORNE	31.7829	635.63	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
842 119411 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
04-12	Sold	29	LONGS DRUG STORES CORP	30.6049	887.51	
12-17	Sold	19	LSI LOGIC CORP	56.5393	1,074.21	
04-15	Sold	19	MAYTAG CORP	60.0291	1,140.51	
04-28	Sold	7	MAYTAG CORP	66.1250	462.86	
09-14	Sold	18	MAYTAG CORP	56.1205	1,010.13	
02-04	Sold	19	MCKESSON HBOC INC	75.5000	1,434.45	
10-22	Sold	7	MEDIMMUNE INC	100.1730	701.18	
09-13	Sold	15	MGIC INVT CORP	40.5440	608.13	
11-19	Sold	52	MMC NETWORKS INC	17.9744	934.63	
04-28	Sold	12	MONTANA POWER CO	77.5000	929.96	
10-25	Sold	60	MONTANA POWER CO	28.0519	1,683.05	
10-27	Sold	24	NAVIGANT CONSULTING INC	32.9022	789.62	
03-18	Sold	42	NETSCAPE COMM CORP	90.1825	3,787.54	
04-28	Sold	5	NETWORK SOLUTION INC CL A	80.1250	400.61	
06-10	Sold	8	NETWORK SOLUTION INC CL A	56.0492	448.37	
03-25	Sold	37	NETWORKS ASSOCIATES INC	30.2147	1,117.90	
10-18	Sold	8	NEXTEL COMMUNICATIONS INC CL A	72.7087	581.65	
11-15	Sold	27	NIKE INC B	47.2252	1,275.03	
04-26	Sold	55	NOVELL INC	21.5000	1,182.46	
04-28	Sold	19	NOVELL INC	24	455.98	
10-07	Sold	23	NOVELL INC	16.7718	385.73	
10-15	Sold	38	NOVELL INC	20.1468	765.55	
03-08	Sold	12	NOVELLUS SYSTEM	57.0930	685.09	
04-28	Sold	11	NOVELLUS SYSTEM	55.4375	609.78	
05-28	Sold	14	NOVELLUS SYSTEM	51.0961	715.32	
03-09	Sold	72	OMNICARE INC	23.1791	1,668.84	
01-08	Sold	15	OMNICOM GROUP	57 5/16	859.66	
04-28	Sold	10	OMNICOM GROUP	76.7500	767.47	
07-23	Sold	6	OMNICOM GROUP	75.1170	450.68	
08-17	Sold	14	OMNICOM GROUP	68.0207	952.25	
01-08	Sold	18	OWENS CORNING	34.4237	619.60	
04-16	Sold	45	PAPA JOHNS INTL INC	36.4563	1,640.47	
12-31	Sold	4	PHONE.COM INC	98.6298	394.50	
04-05	Sold	12	PMC SIERRA INC	73.1450	877.71	
04-28	Sold	8	PMC SIERRA INC	94.6250	756.97	
07-27	Sold	11	PMC SIERRA INC	72.5731	798.27	
09-29	Sold	9	PMC SIERRA INC	87.4814	787.30	
12-17	Sold	6	PMC SIERRA INC	110.1038	660.59	
04-28	Sold	10	PROVIDIAN FINCL CORP	129.6250	1,296.20	
05-25	Sold	8	PROVIDIAN FINCL CORP	103.6817	829.42	
08-10	Sold	12	PROVIDIAN FINCL CORP	84	1,007.96	
11-18	Sold	11	PROVIDIAN FINCL CORP	81.9788	901.74	
10-08	Sold	16	PSINET INC	33.3171	533.05	
05-28	Sold	28	QUALCOMM INC	92.9701	2,603.07	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number 842 119411 FA 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
01-29	Sold	25	QUINTILES TRANSNATIONAL	46.0181	1,150.41	
09-13	Sold	21	READERS DIGEST ASSOC A NON VTG	29.3436	616.19	
09-22	Sold	16	READERS DIGEST ASSOC A NON VTG	30.9375	494.98	
03-08	Sold	36	ROBERT HALF INT	36	1,295.95	
09-22	Sold	28	ROCKWELL INTL CP NEW	54.2549	1,519.08	
04-28	Sold	20	RSL COMMUNICATIONS LTD A	33.1250	662.47	
07-12	Sold	37	RSL COMMUNICATIONS LTD A	18.0359	667.30	
10-26	Sold	42	SAP AKTIENGESELLSCHAFT ADS	33 6/16	1,401.70	
03-08	Sold	28	SEAGATE TECHNOLOGY	29	811.97	
03-30	Sold	37	SEAGATE TECHNOLOGY	27.3808	1,013.05	
11-30	Sold	20	SEALED AIR CP NEW	48.4037	968.03	
04-14	Sold	41	SHAW INDUSTRIES INC	18	737.97	
05-05	Sold	22	SHAW INDUSTRIES INC	18.3750	404.23	
07-26	Sold	43	SHAW INDUSTRIES INC	17.7222	762.02	
04-14	Sold	26	SKYWEST INC	25.1336	653.44	
04-28	Sold	19	SKYWEST INC	27.6250	524.86	
05-28	Sold	45	SKYWEST INC	23.6887	1,065.95	
04-28	Sold	16	SOLECTRON CP	50	799.97	
07-27	Sold	6	SOLECTRON CP	62.5894	375.52	
09-20	Sold	9	SOLECTRON CP	75 3/4	681.72	
07-23	Sold	14	STARWOOD HTLS & RSTS WW INC	28.5024	399.01	
03-01	Sold	21	SYMBOL TECHNLGS	54.5701	1,145.93	
03-26	Sold	24	SYMBOL TECHNLGS	44.9833	1,079.56	
04-28	Sold	14	TERADYNE INC	57.3125	802.35	
06-21	Sold	9	TERADYNE INC	68.5000	616.47	
12-17	Sold	17	TERADYNE INC	42.9150	729.53	
09-24	Sold	17	TIDEWATER INC	29.0586	493.98	
04-28	Sold	7	TIFFANY & COMPANY NEW	78.2500	547.73	
10-27	Sold	19	TIFFANY & COMPANY NEW	54.7500	1,040.21	
04-28	Sold	29	TJX COS INC NEW	34	985.96	
11-12	Sold	23	TJX COS INC NEW	23.6740	544.48	
11-22	Sold	30	TJX COS INC NEW	23	689.97	
04-28	Sold	89	TOSCO CORP NEW	26.3125	2,341.73	
09-23	Sold	20	TOSCO CORP NEW	26.1632	523.24	
10-04	Sold	41	TOSCO CORP NEW	25.5231	1,046.41	
02-04	Sold	18	TRANSACTION SYS ARCH INC A	47.5000	854.97	
03-08	Sold	24	TRANSACTION SYS ARCH INC A	39.1612	939.83	
05-25	Sold	74	TRANSOCEAN OFFSHORE INC	24.8650	1,839.94	
08-09	Sold	18	UNION CARBIDE CORP	59.6550	1,073.75	
10-04	Sold	21	UNION CARBIDE CORP	55.2136	1,159.45	
04-05	Sold	64	UNISYS CORP	29.0132	1,856.77	
04-28	Sold	20	UNISYS CORP	30.5000	609.97	
10-20	Sold	23	UNISYS CORP	24.2124	556.87	
11-01	Sold	25	UNISYS CORP	22.0705	551.74	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number 642 119411 FA 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
04-28	Sold	14	USWEB CORP	27.3750	383.23	
05-10	Sold	22	USWEB CORP	23.7958	523.49	
12-28	Sold	22	USWEB CORP	47.1333	1,036.89	
11-16	Sold	23	VALASSIS COMMUNICATIONS INC	37.0307	851.68	
04-26	Sold	4	VERISIGN INC	121.3640	485.44	
05-10	Sold	6	VERISIGN INC	101.0940	606.53	
04-23	Sold	8	VERITAS SOFTWARE DE	67.8750	542.98	
04-28	Sold	11	VERITAS SOFTWARE DE	74.5000	819.47	
07-23	Sold	10	VERITAS SOFTWARE DE	58.1015	581.00	
10-21	Sold	9	VERITAS SOFTWARE DE	81.8233	736.38	
04-28	Sold	7	VISX INC DEL	121.7500	852.22	
05-10	Sold	8	VISX INC DEL	116.2500	929.96	TRADE CARRIES STOCK DISTRIB.
10-06	Sold	8	VISX INC DEL	72.9604	583.66	
11-29	Sold	8	VISX INC DEL	76.9004	615.17	
12-10	Sold	15	VISX INC DEL	50.4244	756.34	
04-19	Sold	17	VITESSE SEMICONDUCTORS	47.0571	799.94	
04-28	Sold	17	VITESSE SEMICONDUCTORS	50.7500	862.72	
07-16	Sold	7	VITESSE SEMICONDUCTORS	67.0532	469.35	
10-21	Sold	6	VITESSE SEMICONDUCTORS	73.6085	441.63	TRADE CARRIES STOCK DISTRIB.
04-28	Sold	12	WASTE MGMT INC (DELA)	52.5000	629.97	
07-06	Sold	34	WASTE MGMT INC (DELA)	53.9047	1,832.69	
04-28	Sold	7	WATERS CORP	108.2500	757.72	
06-29	Sold	9	WATERS CORP	54 4/16	488.23	
11-09	Sold	11	WATERS CORP	46.5716	512.27	
11-10	Sold	8	WATERS CORP	39.1006	312.78	
03-25	Sold	46	WATSON PHARMACEUTICAL INC	38.7595	1,782.88	
04-12	Sold	24	WEBSTER FINCL CORP	28.6559	687.71	
02-01	Sold	20	WELLPOINT HLTH NET INC NEW	71.6524	1,433.00	
09-09	Sold	15	WELLPOINT HLTH NET INC NEW	73.3966	1,100.91	
04-26	Sold	49	WESTERN WIRELESS CORP CL A	40.0023	1,960.04	
04-28	Sold	11	WESTERN WIRELESS CORP CL A	40.1250	441.36	
05-12	Sold	33	WESTERN WIRELESS CORP CL A	21.3094	703.18	
03-10	Sold	53	WESTPOINT STEVENS INCORP CL A	25.3973	1,346.01	
12-20	Sold	40	WHITTMAN HART INC	47.8148	1,912.52	
04-28	Sold	17	WILLIAMS CO INC	44.5000	756.47	
07-06	Sold	24	WILLIAMS CO INC	42.7543	1,026.06	
07-13	Sold	22	WILLIAMS CO INC	44 2/16	970.71	
09-27	Sold	6	XILINX INC	65.8750	395.23	
12-15	Sold	7	XILINX INC	83.2336	582.62	
01-19	Sold	7	YAHOO INC	395.5625	2,768.84	
05-28	Sold	8	YAHOO INC	132.9132	1,063.27	
06-18	Sold	6	YAHOO INC	128.5505	771.27	
			Total Sales Proceeds/Redemptions		280,652.15	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
642 119411 022

Other Credits

Date	Activity	Description	Amount	Additional Information
02-26	Stock Dividend	BEAR STEARNS COMPANIES INC	8.65	CASH IN LIEU FRACTIONAL SHARE
04-15	Stock Dividend	COMVERSE TECHNOLOGY INC	32.40	CASH IN LIEU FRACTIONAL SHARE
04-30	Adjustment	ACCESS 2Q99 CAPCHG NIC	140.70	
07-16	Stock Dividend	INTIMATE BRANDS INC	6.74	CASH IN LIEU FRACTIONAL SHARE
11-19	Stock Dividend	VERITAS SOFTWARE DE	46.87	CASH IN LIEU FRACTIONAL SHARE
		Total Other Credits	235.36	

Total Credits To Your Account $281,488.48

DEBITS TO YOUR ACCOUNT

Withdrawal

Date	Activity	Description	Amount	Additional Information
04-28	Transferred	WIRED FUNDS SENT	50,000.00	BENE: MERRILL LYNCH ACCT: 1011730
		Total Withdrawals	-50,000.00	

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
08-16	Bought	10	ABERCROMBIE & FITCH CO	37 12/16	377.50	
12-22	Bought	15	ABGENIX INC	109.4941	1,642.41	
08-02	Bought	14	AES CORP	59.5600	833.84	
09-28	Bought	15	AES CORP	65.2500	978.75	
03-09	Bought	38	AIRBORNE FREIGHT DEL	37.5409	1,426.55	
04-22	Bought	43	AK STEEL HOLDING CORP	28.3447	1,218.82	
02-09	Bought	33	ALLERGAN INC	79.5116	2,623.88	
06-23	Bought	39	ALZA CP COM	45.3235	1,767.62	
01-11	Bought	5	AMAZON COM INC	136.9375	684.69	
03-09	Bought	96	AMDOCS LIMITED ORD	22.2534	2,136.33	
06-04	Bought	85	AMER POWER CONVER	18.5624	1,577.80	
05-12	Bought	19	AMERICAN EAGLE OUTFITTERS NEW	38.5805	733.03	
12-21	Bought	68	AMERICAN TOWER CP CLASS A	30.3382	2,063.00	
03-26	Bought	28	ANDRX CORPORATION	76.9875	2,155.65	
03-09	Bought	58	ANN TAYLOR STORES CORPORATION	41.8623	2,428.01	
05-26	Bought	31	APACHE CORP	35.5000	1,100.50	
07-02	Bought	14	APACHE CORP	39.5625	553.88	
10-27	Bought	10	ART TECHNOLOGY GROUP INC	63.5424	635.42	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number 642 119411 FA 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
11-03	Bought	55	ASPECT TELECOMMUNICATIONS CORP	24.8392	1,366.16	
06-02	Received	11	AT HOME CORPORATION			EXCHANGE
06-11	Bought	11	AVERY DENNISON CORPORATION	64.9005	713.91	
09-29	Bought	49	BEA SYSTEMS INC	30.4125	1,490.21	
08-16	Bought	8	BED BATH & BEYOND INC	30.5099	244.08	
10-13	Bought	8	BEST BUY CO	66 2/16	529.00	
06-02	Bought	32	BMC SOFTWARE	45.1119	1,443.58	
09-15	Bought	7	BMC SOFTWARE	65.1005	455.70	
09-28	Bought	6	BMC SOFTWARE	67.9724	407.83	
08-02	Bought	13	BROADCOM CORP CL A	120.6433	1,568.36	
11-03	Bought	15	CAPITAL ONE FINANCIAL CORP	52.8133	792.20	
02-04	Received	42	CARDINAL HEALTH INC			EXCHANGE
08-04	Bought	27	CBT GROUP PLC ADR	26.9738	728.29	
12-28	Bought	6	CELAERA GENOMICS GROUP	118	708.00	
05-24	Bought	28	CHANCELLOR MEDIA CORP	56	1,568.00	
03-23	Bought	26	CHARLES SCHWAB NEW	89.6273	2,330.31	
12-03	Bought	29	CHARTERED SEMICONDUCTOR ADS	53.5406	1,552.68	
12-16	Bought	14	CIENA CORPORATION	71.8525	1,005.94	
10-07	Bought	25	CIRCUIT CY STRS CIRCUIT CY GP	42.9336	1,073.34	
10-18	Bought	12	CIRCUIT CY STRS CIRCUIT CY GP	47.6875	572.25	
08-18	Bought	14	CITRIX SYSTEMS INC	52.9228	740.92	
11-03	Bought	17	CLARENT CORP	96.8232	1,645.99	
03-09	Bought	12	CMGI INC	142.8763	1,714.52	
06-21	Bought	36	COASTAL CORP	42.9908	1,547.67	
03-09	Bought	40	COMAIR HOLDINGS	39.0411	1,561.64	
01-28	Bought	48	COMCAST SPL A	64.3327	3,087.97	
08-20	Bought	30	COMMSCOPE INC	38.2413	1,147.24	
09-28	Bought	17	COMMSCOPE INC	34	578.00	
11-03	Bought	39	CONCORD EFS INC	26.6226	1,038.28	
11-24	Bought	18	CONCORD EFS INC	31.9347	574.82	
06-25	Bought	18	CONEXANT SYSTEMS INC	67.3072	1,211.53	
10-26	Bought	5	CONEXANT SYSTEMS INC	83.5675	417.84	TRADE CARRIES STOCK DISTRIB.
03-12	Bought	36	CORNING INC	59.3046	2,134.97	
12-08	Bought	19	COSTCO WHOLSALE CORP	97.0729	1,844.39	
07-28	Bought	23	COVAD COMMUNICATIONS GROUP	59.4883	1,368.23	
09-22	Bought	54	CYPRESS SEMICONDUCTOR DELA	27.5711	1,488.84	
10-05	Bought	53	DOLLAR GENERAL CORPORATION	30.9782	1,641.84	
07-14	Bought	11	DOUBLECLICK INC	103.0525	1,133.58	
07-14	Bought	40	E TRADE GRP INC	41.0199	1,640.80	
11-04	Bought	13	ECHOSTAR COMM CORP CL A	67.5404	878.03	
12-10	Bought	7	ECHOSTAR COMM CORP CL A	83.3750	583.63	
06-01	Bought	17	ELECTR DATA SYSTEMS CORP	57.2290	972.89	
04-05	Bought	58	ELECTRONICS FOR IMAGING INC	41.1466	2,386.50	
10-27	Bought	5	EMULEX CORP	159.0733	795.37	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
642 119411 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
12-15	Bought	37	ESPEED INC CL A	40.5547	1,500.52	
10-27	Bought	23	ESTEE LAUDER COMPANIES INC A	44.8846	1,032.35	
03-31	Bought	11	EXCITE INC	137.2504	1,509.75	
07-14	Bought	9	EXODUS COMMUNICATIONS INC	133.3556	1,200.20	
12-10	Bought	6	EXODUS COMMUNICATIONS INC	142.0641	852.38	TRADE CARRIES STOCK DISTRIB.
05-26	Bought	25	FOREST LABORATORIES	50.0625	1,251.56	
07-29	Bought	11	FOREST LABORATORIES	49 3/16	541.06	
02-09	Bought	83	FOX ENTMT GROUP INC CLASS A	25.9236	2,151.66	
08-18	Bought	8	GATEWAY INC	82.1250	657.00	
08-23	Bought	7	GATEWAY INC	86.5000	605.50	
12-10	Bought	10	GEMSTAR INTL GP INC	129.2488	1,292.49	TRADE CARRIES STOCK DISTRIB.
03-17	Bought	24	GENENTECH INC (NEW)	85.1545	2,043.71	
12-21	Bought	18	GENENTECH INC	111.3286	2,003.91	
05-06	Bought	48	GENTEX CP	31.1250	1,494.00	
04-20	Bought	18	GEORGIA-PAC (GEORGIA PAC GP)	94.6250	1,703.25	
08-02	Bought	14	GILEAD SCIENCE	63.9750	895.65	
04-05	Bought	65	HALLIBURTON CO HLDG CO	40.3493	2,622.70	
10-22	Bought	17	HARLEY DAVIDSON INC	58.8304	1,000.12	
05-12	Bought	22	HASBRO INC	34	748.00	
04-27	Bought	125	HEALTH MGMT ASSOC CL A	16.1250	2,015.63	
08-16	Bought	14	I D E C PHARMACEUTICALS	118.7813	1,662.94	
07-14	Bought	7	INKTOMI CRP	139.2195	974.54	
09-07	Bought	14	INTERNET CAPITAL GROUP INC	82.1325	1,149.86	
05-12	Bought	23	INTIMATE BRANDS INC	52.7500	1,213.25	
08-17	Bought	13	INTUIT INC	77.6044	1,008.86	
08-13	Bought	8	JDS UNIPHASE CORP	84.9406	679.52	
11-24	Bought	3	JDS UNIPHASE CORP	207.2341	621.70	
01-29	Bought	86	JONES APPAREL GRP INC	29	2,494.00	
10-04	Bought	18	JONES APPAREL GRP INC	29 7/8	537.75	
10-25	Bought	18	JONES APPAREL GRP INC	31.0754	559.36	
10-13	Bought	4	JUNIPER NETWORKS	193.9967	775.99	
10-22	Bought	2	JUNIPER NETWORKS	234.6657	469.33	
02-09	Bought	57	KEEBLER FOODS COMPANY	37.4077	2,132.24	
04-19	Bought	13	KNIGHT / TRIMARK GROUP INC	123.8750	1,610.38	
11-18	Bought	30	KNIGHT / TRIMARK GROUP INC	43.2335	1,297.01	
10-26	Bought	13	LAM RESEARCH CORPORATION	76.6250	996.13	
11-01	Bought	8	LAM RESEARCH CORPORATION	76.2500	610.00	
11-16	Bought	5	LEXMARK INTL GROUP INC A	86.4796	432.40	
07-07	Bought	23	LINEAR TECHNOLOGY CORPORATION	68.9725	1,586.37	
09-20	Bought	12	LINEAR TECHNOLOGY CORPORATION	66.9826	803.79	
08-10	Bought	20	LIZ CLAIBORNE	37.8568	757.14	
11-16	Bought	19	LSI LOGIC CORP	64.0633	1,217.20	
07-12	Bought	21	MEDIMMUNE INC	74.4951	1,564.40	
09-03	Bought	22	MERCURY INTERACTIVE CORP	47.7272	1,050.00	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number 842 118411 FA 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
08-10	Bought	15	MGIC INVT CORP	48.5153	727.73	
07-08	Bought	32	MGM GRAND INC	47.9872	1,535.59	
11-16	Bought	52	MMC NETWORKS INC	26.8997	1,398.78	
01-14	Bought	42	MONTANA POWER CO	53 4/16	2,236.50	
09-03	Bought	24	NAVIGANT CONSULTING INC	44	1,056.00	
01-08	Bought	31	NETSCAPE COMM CORP	63.3636	1,964.27	
01-11	Bought	11	NETSCAPE COMM CORP	64.9767	714.74	
04-16	Bought	13	NETWORK SOLUTION INC CL A	118.3824	1,538.97	
09-15	Bought	22	NEXTEL COMMUNICATIONS INC CL A	68.3135	1,502.90	
11-24	Bought	6	NEXTEL COMMUNICATIONS INC CL A	97	582.00	
10-08	Bought	27	NIKE INC B	58.3987	1,576.76	
07-07	Bought	26	NOVELL INC	26.4318	687.23	
01-11	Bought	9	NOVELLUS SYSTEM	62.1705	559.53	
12-15	Bought	19	OMNICOM GROUP	100.8653	1,916.44	
06-23	Bought	13	PE CORP PE BIOSYS GP	115	1,495.00	
10-26	Bought	2	PHONE.COM INC	243.5293	487.06	
11-16	Bought	6	PMC SIERRA INC	107 7/16	644.63	
10-22	Bought	11	PROVIDIAN FINCL CORP	87.1018	958.12	
07-14	Bought	16	PSINET INC	56.5158	904.25	
04-16	Bought	14	QUALCOMM INC	170.6641	2,389.30	
11-10	Bought	46	QWEST COMMUNICATIONS INTL INC	36.2996	1,669.78	
06-24	Bought	37	READERS DIGEST ASSOC A NON VTG	38.8502	1,437.46	
07-20	Bought	9	REAL NETWORKS INC	90.7500	816.75	
10-01	Bought	6	REAL NETWORKS INC	100.3750	602.25	
05-17	Bought	28	ROCKWELL INTL CP NEW	59.6013	1,668.84	
06-01	Bought	67	ROWAN COMPANIES INC	17.4825	1,171.33	
11-24	Bought	33	ROWAN COMPANIES INC	18.9375	624.94	
04-05	Bought	57	RSL COMMUNICATIONS LTD A	38.2430	2,179.85	
11-16	Bought	5	SAFEGUARD SCIENTIFICS	118.7500	593.75	
12-10	Bought	5	SAFEGUARD SCIENTIFICS	131.3629	656.81	
10-05	Bought	42	SAP AKTIENGESELLSCHAFT ADS	37.7335	1,584.81	
11-16	Bought	16	SAPIENT CORP	71	1,136.00	
01-13	Bought	65	SEAGATE TECHNOLOGY	37.3614	2,428.49	
06-11	Bought	20	SEALED AIR CP NEW	66	1,320.00	
02-09	Bought	90	SKYWEST INC	33.6514	3,028.63	
12-21	Bought	55	SMURFIT STONE CONTAINER CP NEW	23.5296	1,294.13	
04-19	Bought	45	SOLECTRON CP	52.7467	2,373.60	
05-25	Bought	14	STARWOOD HTLS & RSTS WW INC	35.4660	496.52	
10-27	Bought	2	SYCAMORE NETWORKS INC	208.4675	416.94	
11-26	Bought	2	SYCAMORE NETWORKS INC	262.0641	524.13	
11-01	Bought	24	SYMANTEC CORP	45.0581	1,081.39	
10-27	Bought	29	SYSCO CORP	35.9646	1,042.97	
03-24	Bought	41	TERADYNE INC	57.0302	2,338.24	
08-10	Bought	53	TIDEWATER INC	34.1983	1,812.51	

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THE HONORABLE GERALD D KLECZKA
ACCESS #1-NICHOLAS-APPLEGATE

Account Number FA
642 119411 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
11-24	Bought	17	TIDEWATER INC	35.0307	595.52	
04-16	Bought	25	TIFFANY & COMPANY NEW	81.9676	2,049.19	
12-14	Bought	8	TIFFANY & COMPANY NEW	82.0966	656.77	
04-27	Bought	89	TOSCO CORP NEW	26.6417	2,371.11	
05-06	Bought	61	TOSCO CORP NEW	27.3125	1,666.06	
04-16	Bought	74	TRANSOCEAN OFFSHORE INC	27.1164	2,006.61	
10-15	Bought	30	TRIBUNE CO DELAWARE NEW	50.9917	1,529.75	
12-20	Bought	5	TRIBUNE CO DELAWARE NEW	56.3750	281.88	
06-23	Bought	19	UNION CARBIDE CORP	51 15/16	986.81	
07-30	Bought	20	UNION CARBIDE CORP	47.5000	950.00	
06-09	Bought	5	UNIPHASE CORP	137.9718	689.86	
10-01	Bought	7	UNISYS CORP	45	315.00	
07-08	Bought	17	UNIVISION COMM INC CLASS A	65.7846	1,118.34	
07-29	Bought	10	UNIVISION COMM INC CLASS A	68.1677	681.68	
03-31	Bought	36	USWEB CORP	41.9875	1,511.55	
11-03	Bought	27	USWEB CORP	38.6616	1,043.86	
11-10	Bought	15	USWEB CORP	40.0625	600.94	
06-15	Bought	27	VALASSIS COMMUNICATIONS INC	38.3576	1,035.66	
07-30	Bought	14	VALASSIS COMMUNICATIONS INC	37.7702	528.78	
03-16	Bought	10	VERISIGN INC	122	1,220.00	
12-27	Bought	6	VERISIGN INC	188.8123	1,132.87	
09-23	Bought	55	VISHAY INTERTECHNOLOGY INC	25.0706	1,378.88	
06-09	Bought	10	VISX INC DEL	67.4622	674.62	
10-22	Bought	11	VISX INC DEL	72.1434	793.58	
03-12	Bought	46	WASTE MGMT INC (DELA)	49.8019	2,290.89	
04-05	Bought	21	WATERS CORP	107	2,247.00	
01-19	Bought	93	WESTERN WIRELESS CORP CL A	23.8125	2,214.56	
10-20	Bought	40	WHITTMAN HART INC	38.0583	1,522.33	
03-09	Bought	63	WILLIAMS CO INC	34.1050	2,148.62	
08-17	Bought	14	XILINX INC	67.0965	939.35	
09-20	Bought	8	XILINX INC	71.2321	569.86	
10-22	Bought	6	XILINX INC	70.1250	420.75	
10-22	Bought	16	XIRCOM INC	51.2999	820.80	
12-21	Bought	10	XIRCOM INC	68.5377	685.38	
			Total Funds to Purchase Securities		-225,803.39	

Other Debits

Date	Activity	Description	Amount	Additional Information
01-20	Charge	ACCESS 1Q99 FEE NIC	-702.55	
04-20	Charge	ACCESS 2Q99 FEE NIC	-706.09	
04-28	Charge	WIRED FUNDS FEE	-15.00	
07-14	Charge	ACCESS 3Q99 FEE NIC	-498.55	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

Ronald Klink
(Full Name)

3410 Lashan Drive
(Mailing Address)

Murrysville, PA 15668-9480

(202) 225-2565
Daytime Telephone:

Filer Status	[X] Member of the U.S House of Representatives — State: PA District: 4th	[X] Officer or Employee — Employing Office: US House of Representatives	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date _____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**		X
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ron Klink	5-16-00

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Name	Ronald Klink	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Linda Klink RD #7 Box 262 Greensburg, PA 15601-9569	Spouse-Hair Dresser	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (Dividends; Rent; Interest; Capital Gains; Excepted Trust; Qualified Blind Trust; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	Mega Corp. Stock	E	Dividends: X	IV	P
DC	Simon & Schuster	Indefinite	Royalties	IX	
JT	1st Bank of Paducah, KY accounts	F	Interest: X	VI	
SP	Indland Monthly Inc. Fund	C	Other Type of Income: Partnership Inc.	III	
JT	Westinghouse Common Stock	C	Dividends: X	I	
JT	Irwin Bank	C	Interest: X	II	
JT	Irwin Bank	C	Interest: X	III	
DC	Pioneer II	C	Dividends: X; Capital Gains: X	III	
DC	Coca Cola	C	Dividends: X	II	

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ronald Klink

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Paine Weber-Mutual Fund, Inc					X								X		X	X				N/A			IRA								
SP	Paine Weber-Mutual Fund, Inc					X								X		X	X				N/A			IRA								
SP	Resources Trust IRA		X											X							N/A			IRA								
SP	Canada Life Assoc.-Trust IRA			X										X							N/A			IRA								
SP	Pioneer III IRA			X													X				N/A			IRA								
JT	Hartford Dir Var Annuity				X											X					X											
JT	American Funds IRA			X										X				X			N/A			IRA								
JT	Paine Weber Money Account				X									X								X										
SP	Washington Mutual, Inc IRA			X										X							N/A			IRA								
JT	Rob Roy	X																														S
JT	Freemarket, Inc.	X																														P/S
JT	Paxson Comm	X																														P/S
JT	K Mart	X																														S
JT	Pepsi Co.	X																														S
JT	Hewlett Packard	X																														S
JT	3 Com Corp.	X																														S
JT	Intel Corp.	X																														S
JT	2 Tel Tech, Inc.				X									X							X											P
DC	Fore Systems	X																														P/S
JT	Olde Disc. Money Market			X										X								X										P
DC	II VI Corp			X										X							X											
DC	Microsoft			X										X							X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ronald Klink

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Med Tronics, Inc.			X										X								X										
JT	AOL, Inc.			X										X								X										P
JT	Tricon Global Restaurants			X										X								X										P
DC	American Funds			X										X								X										

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SCHEDULE IV — TRANSACTIONS

Name Ronald Klink

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,000-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	Free Market . Common Stock		X		12-20-99		X								
DC	Fore Systems Common Stock	X	X		1-06-99 7-16-99	X									
JT	Paxson Common Stock		X		12-13-99	X									
JT	Intel Corp. Common Stock		X		1-04-99			X							
JT	Hewlett Packard Common Stock		X		12-03-99	X									
JT	3 Com Corp. Common Stock		X		12-03-99		X								
JT	K Mart Common Stock		X		12-13-99	X									
JT	Pepsi Co. Common Stock		X		6-18-99		X								
JT	Rob Roy Common Stock		X		12-13-99	X									
JT	Free Market Common Stock	X			12-01-99		X								
JT	Paxson Common Stock	X			8-16-99		X								
JT	2 Tel Tech, Inc.	X			12-17-99		X								
JT	Olde Discount Money Market Fund	X			12-17-99	X									
JT	AOL, Inc.	X			6-18-99	X									
JT	Tricon Global Restaurants	X			2-20-99	X									
DC	American Funds	X			1-06-99	X									

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Name Ronald Klink

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2000 62-753 (rev)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 AM 8:32
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 12 2000
(Office Use Only)

Joseph K. Knollenberg (Full Name)

1130 Park Place Court (Mailing Address)

Bloomfield Hills, MI 48302

Daytime Telephone 202-225-5802

Filer Status	[X] Member of the U.S. House of Representatives	State Michigan District 11th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5. 11 00

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Name	Joseph K. Knollenberg	Page 2 of

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Allstate Insurance Co., Southfield, MI	Company paid portion of Group Term Life Insurance for retired employee	$ 283

For payments to charity in lieu of honoraria, use Schedule II.

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Name	Joseph K. Knollenberg	Page 3 of ...

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
American Rental Association	Speech	April 19, 1999	$ 500
K-Mart Kids Race Against Drugs	Miniature Car Race	Sept. 22, 1999	$ 500

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Name Joseph K. Knollenberg | Page 4 of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B	Block C	Block D	Block E
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT — *Examples* — SP — Mega Corp Stock			X		P
Simon & Schuster	Indefinite				
1st Bank of Paducah, KY accounts	X	X		X	
Royalties				X	
Washington Mutual Inv. Fund Brea, CA	X	X	X		Sold in 2000 *P
Bank One, MI (formerly NBD Bank) Detroit, MI	X	X		X	
The Bank of Bloomfield Hills, Blfd Hills, MI	X	X		X	
Congressional Fed Cr Union, Wasington, DC	X	X	X		
Farm-Thru Helen K. Knollenberg Tr- Matoon, IL	X	X	FARM INTEREST	X	
Research Electro Optics Boulder, CO (320 shs)	X	X	X	X	

For additional assets and unearned income, use next page.

*ADDITIONAL PURCHASES THROUGH DIVIDEND REINVESTMENT PROGRAM

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph K. Knollenberg

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Allstate Annuity Spouse's IRA	X												IRA-NOT			SELF			DIRECTED				N/A								S
	Securities Held Through Paine Webber, Inc. Retirement:																															
	Shs. Stock																															
	1600 Allstate				X									X									X									
	1433 Archer Daniels Midland Co.				X									X									X									** 58 stk DIV
	900 Baker Hughes Inc.	X												X									X									S
	450 Electronic Data Systems				X									X									X									
	350 Emerson Electric Co.				X									X									X									
	1000 Engelhard Corp.				X									X									X									
	1000 Gartner Group Inc. CLA				X									X							X											P – 300
	400 H&R Block Inc.				X									X									X									
	500 Intel Corp.				X									X								X										**-250
	300 Johnson & Johnson Co				X									X									X									
	450 Kimberly Clark Corp.				X									X									X									
	600 Morgan Stanley Dean Witter & Co.					X								X									X									Partial S – 100
	1000 Mylan Laboratories Inc.	X												X							X											S
	1000 Pall Corp.				X									X									X									
	600 Pepsico Inc.				X									X									X									P – 100
	600 Sears Roebuck				X									X									X									Partial S – 600
	400 Shared Medical Sys Corp.				X									X									X									

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**ADDITIONAL SHARES ACQUIRED DUE TO STOCK SPLIT OR STOCK DIVIDEND

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph K. Knollenberg | Page 6 of

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Securities Held Through Paine Webber, Inc. Retirement (cont.)																														
	Shs. Stock																														
	750 Sigma Aldrich Corp.				X									X									X								
	1100 Barnes Group				X									X									X								P
	68 Transocean Offshore Inc			X										X								X									E (1)
	250 Intl. Bus. Machines				X									X								X									P
	300 Merck & Company				X									X									X								P
	350 Schlumberger LTD				X									X									X								P
	750 Paychex, Inc.				X									X									X								P
	50,000 Federal Home Loan Bk				X											X									X						P
	PW Retirement Money Fund					X								X										X							
	50,000 U.S. Treasury Note 6.75%	X														X									X						S
	50,000 U.S. Treasury Note 5.50%					X										X									X						
	50,000 U.S. Treasury Note 6.625%					X										X									X						
	50,000 U.S. Treasury Note 6.0%				X											X									X						
	50,000 U.S. Treasury Note 7.0%					X										X									X						

This page may be copied if more space is required. (1) SPIN-OFF FROM SCHLUMBERGER LTD.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph K. Knollenberg

Page 7 of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Securities Held Through Waterhouse Securities Inc. 55 Water St. NY, NY 10041 Transferred to W.S.Griffith & Co., Inc.:																														
	Shs. Stock																														
SP	7502.40 CMF Money Market Portfolio	X											X									X									S
SP	26 Bed, Bath & Beyond, Inc.	X											X								X										E (1)
SP	24 Cisco Systems Inc.	X											X								X										E (1)
SP	18 Sun Micro Systems, Inc.	X											X								X										** E (1)
SP	771.151 Gabelli Value Fund Inc.	X											X				X							X							* E (1)
SP	389.416 Seligman Communications +Information Fund, Inc.	X											X								X										E (1)

*ADDITIONAL PURCHASES THROUGH DIVIDEND REINVESTMENT PROGRAM

This page may be copied if more space is required. **ADDITIONAL SHARES ACQUIRED DUE TO STOCK SPLIT

(1)ACCOUNT VALUES TRANSFERRED TO W.S. GRIFFITH AND CO., INC

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph K. Knollenberg

Page 8 of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Mutual Funds Held Through Fidelity Investments, Inc. Boston, MA:																															
	Fidelity Stock Selector				X									X			X								X							* P
	Fidelity Equity Income II				X									X			X								X							* P
	Fidelity Fund					X								X			X									X						* P
	PBHG Growth				X												X							X								* P
	Vanguard Windsor II				X									X			X								X							* P
	Fidelity High Income				X									X			X							X								* P
	Spartan Mi Municipal Inc				X									X									X									* P
	Oberweis Emerging Growth				X									X							X											
	Fidelity Mi Muni Money Mkt				X									X									X									

*ADDITIONAL PURCHASES THROUGH DIVIDEND REINVESTMENT PROGRAM

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Joseph K. Knollenberg

Page 9 of _

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other: Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Securities Held Through W.S. Griffith and Co., Inc. 2355 Northside Drive, Ste. 250, San Diego, CA 92108:																															
	Shs. Stock																															
SP	85.111 Alliance Technology Fund, Inc.			X										X			X						X								* P
SP	58 AT&T Corp.			X										X								X									P
SP	CCR MNY Mkt Fund				X									X										X							P
SP	41 DuPont DeNemours			X										X								X									P
SP	675.720 Fidelity Advisor Health Care Fd.			X										X			X					X									* P
SP	841.034 Gabelli Value Fd Inc.				X									X			X							X							* E P (2)
SP	28 General Electric Co			X										X								X									P
SP	404.913 Investment Co. of America			X										X			X							X							* P
SP	255.949 John Hancock Reg Bk Fd			X										X			X							X							* P
SP	156.959 Munder Net Net Fund CLA			X										X			X					X									* P
SP	65 Walmart Stores Inc			X										X								X									P
SP	48 Cisco Systems Inc			X										X							X										** E (2)
SP	35 Microsoft Corp.			X										X							X										P
SP	36 Sun Microsystems Inc			X										X							X										** E (2)

* ADDITIONAL PURCHASES THROUGH DIVIDEND REINVESTMENT PROGRAM

This page may be copied if more space is required. ** ADDITIONAL SHARES ACQUIRED DUE TO STOCK SPLIT

(2) TRANSFERRED INTO ACCOUNT FROM WATERHOUSE SECURITIES, INC.

SCHEDULE IV — TRANSACTIONS

Name Joseph K. Knollenberg

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
SP	Allstate Annuity - Spouse's IRA		X		Closed in 1999	X									
	Activity Through PaineWebber Retirement Account:														
	68 Shs, Archer Daniels Midland Co.			X	5% Stock DIV 9-29-99	(Transaction less than $1,000)									
	900 Shs, Baker Hughes, Inc.		X		12-21-99		X								
	300 Shs, Gartner Group	X			11-01-99	X									
	250 Shs, Intel Corp.			X	2 for 1 split 4-12-99		X								
	100 Shs, Morgan Stanley Dean Witter		X		11-01-99	X									
	1,000 Shs, Mylan Labs		X		12-21-99		X								
	100 Shs, Pepsico Inc.	X			6-16-99	X									
	300 Shs, Sears, Roebuck & Co.		X		3-18-99	X									
	300 Shs, Sears, Roebuck & Co.		X		6-16-99	X									
	1,100 Shs, Barnes Group	X			3-18-99		X								
	750 Shs, Paychex, Inc.	X			6-16-99		X								
	250 Shs, International Business Machines	X			11-01-99		X								
	50,000 Shs, Federal Home Loan Banks 7.010%	X			11-01-99			X							

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Name JOSEPH K. KNOLLENBERG | Page 11 of ___

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Activity Through PaineWebber Retirement Account (cont.):														
	300 Shs, Merck & Company	X			12-21-99		X								
	350 Shs, Schlumberger Ltd.	X			12-21-99		X								
	68 Shs, Transocean Offshore, Inc.			X	Spin Off from Schlumberger	X									
	50,000 U.S. Treasury Notes 6.75%		X		6-30-99		X								
	Activity Through Fidelity Investments, Inc. Dividends Reinvested:														
	Fidelity Stock Selector	X			*	X									
	Fidelity Equity Income II	X			*	X									
	Fidelity Fund	X			*	X									
	PBHG Growth	X			*	X									
	Vanguard Windsor II	X			*	X									
	Fidelity High Income	X			*	X									
	Spartan Mi Municipal Income	X			*		(Transaction less than $1,000)								

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*DIVIDENDS WERE REINVESTED THROUGHOUT THE YEAR AS DIVIDENDS AND CAPITAL GAINS WERE RECEIVED.

SCHEDULE IV — TRANSACTIONS

Name Joseph K. Knollenberg

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Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Activity Through Waterhouse Securities Prior to Transfer to W.S. Griffith Co., Inc.:														
SP	79.16 CMF Money Market Portfolio Fund	X			Various thru 4-15-99		(Transaction less than $1,000)								
SP	67.47 Shs, Gabelli Value Fund, Inc.	X			DIV Reinv. thru 4-15-99	X									
SP	9 Shs, Sun Microsystems, Inc.			X	2 for 1 split 4-14-99		(Transaction less than $1,000)								
	Activity Through Waterhouse Securities, Inc. Acct Value Transferred to W.S. Griffith Co.,Inc														
SP	26 Shs, Bed, Bath & Beyond, Inc.			X	Transferred to W.S. Griffith Co., Inc. 4-15-99		(Transaction less than $1,000)								
SP	24 Shs, Cisco Systems, Inc.			X		X									
SP	771.151 Shs, Gabelli Value Fund, Inc.			X	"	X									
SP	389.416 Shs, Seligman Com & Info Fd.			X	"	X									
SP	18 Shs, SIcrosystems, Inc.			X	"	X									
SP	7502.40 CMF Money Market Portfolio		X		4-15-99	X									

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Name Joseph K. Knollenberg | Page 13 of ___

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Activity Through W.S. Griffith & Co., Inc.:														
SP	26 Shs, Bed Bath & Beyond, Inc.		X	X	Transferred in then sold 5-4-99		(Transaction less than $1,000)								
SP	24 Shs, Cisco Systems, Inc.			X	Transferred in 4-15-99	X									
SP	18 Shs, Sun Microsystems, Inc.			X	Transferred in 4-15-99	X									
SP	771.151 Gabelli Value Fund, Inc.			X	Transferred in 4-15-99	X									
SP	389.416 Shs, Seligman Com & Info Fund		X	X	Transferred in then sold 5-3-99	X									
SP	CCR Money Market Fund - Cash Fund	X			4-15-99		X								
SP	58 Shs, AT&T Corp.	X			5-04-99	X									
SP	24 Shs, Cisco Systems, Inc.			X	2 for 1 split 1999	X									
SP	41 Shs, DuPont DeNemours	X			5-04-99	X									
SP	28 Shs, General Electric	X			5-04-99	X									
SP	35 Shs, Microsoft	X			5-04-99	X									
SP	18 Shs, Sun Microsystems, Inc.			X	2 for 1 split 1999	X									
SP	65 Shs, Walmart Stores, Inc.	X			5-04-99	X									
SP	85.111 Shs, Alliance Technology Fund, Inc.	X			5-04-99*	X									
SP	675.720 Fidelity Advisor Health Care Fund	X			5-04-99*	X									

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*PLUS DIVIDEND REINVESTMENTS THROUGHOUT THE YEAR

Name Joseph K. Knollenberg | Page 14 of ___

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Activity Through W.S. Griffith & Co., Inc. (cont.):														
SP	69.883 Shs, Gabelli Value Fund	X			Thru DIV reinvestment all year	X									
SP	404.913 Shs, Investment Co. of America	X			5-04-99*	X									
SP	255.949 Shs, John Hancock Regional Bk Fd	X			5-04-99*	X									
SP	156.859 Shs, Munder Netnet Fund CLA	X			5-04-99*	X									
	Washington Mutual Investors Fund	X			Thru DIV reinvestment all year	X									

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*PLUS DIVIDEND REINVESTMENTS THROUGHOUT THE YEAR

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Armenian Assembly of America	March 5-8	Wash D.C.-Ft. Meyers-Boca Raton-Wash D.C.	N	Y	Y	N
Aspen Institute	March 19-21	Wash D.C.-Hershey, PA-Wash D.C.	Y	Y	Y	N
Seeds of Peace Foundation	July 8	Waterford, MI-Lewiston, Maine-Waterford, MI	N	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY -5 AM 8:39
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL
(Office Use Only)

(13)

MC

James Thomas Kolbe
(Full Name)

2266 Rayburn House Office Building
(Mailing Address)

Washington DC 20515
Daytime Telephone 202-225-2542

Filer Status	[X] Member of the U S House of Representatives	State AZ District 05	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.		4 MAY 00

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Name	Page 1 of 1

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name James Thomas Kolbe | Page 1 of 1

SCHEDULE II – PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C. XYZ Magazine	Speech Article	Feb. 2, 1999 Aug. 13, 1999	$2,000 $ 500
Kmart Family Foundation, Troy, MI	Race participation	Sept. 22, 1999	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
1/3 interest in 300 acres of land, Sonoita, AZ	$100,001 - $250,000	Grazing fee	$1 - $200	
Wright Patman FCU - Checking and Savings, Washington, DC	$1,001 - $15,000	Interest	$1 - $200	
JT Arizona Bank - Checking and Savings, Tucson, AZ	$1,001 - $15,000	Interest	$1 - $200	
JT NationsBank - Checking and Savings, Washington, DC	$1,001 - $15,000	Interest	$1 - $200	
Exeter Real Estate Investors XX - Limited Partnership	$15,001 - $50,000	None	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Rental of Efficiency Apartment attached to Residence, 519 East Capitol Street, SE, Washington, DC	None	Rent	$5,001 - $15,000	
Golder Ranch Assoc , Limited Partnership - 1/2 unit	$1,001 - $15,000	None	None	
Wood Canyon Corp. - 5% of outstanding stock	$50,001 - $100,000	None	None	
Dain Rauscher - Daily Accumulation Fund	$1,001 - $15,000	Interest	$1 - $200	
Investment Company of America - Mutual Fund	$100,001 - $250,000	Capital Gains	$5,001 - $15,000	
Investment Company of America - Mutual Fund	$100,001 - $250,000	Interest	$2,501 - $5,000	
Delaware Group Trend Fund	$50,001 - $100,000	Capital Gains	$2,501 - $5,000	
Insured Municipal Income Trust	$1,001 - $15,000	Interest	$1 - $200	
Chandler Water & Sewer Revenue Bonds	$15,001 - $50,000	Interest	$1,001 - $2,500	
Mexico Fund - Mutual Fund	$15,001 - $50 000	Dividends	$201 - $1,000	
Medtronic, Inc - Stock	$100,001 - $250,000	Dividends	$201 - $1,000	
Home Depot - Stock	$15,001 - $50,000	Dividends	$1 - $200	
Financing Corp CPN FICO	$1 - $1,000	None	None	
Andrew Corp. - Stock	$1,001 - $15,000	None	None	S
Health South Corp - Stock	$1,001 - $15,000	None	None	
Motorola Corp - Stock	$50,001 - $100,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Broken Hill Proprietary - Stock	$1,001 - $15,000	Dividends	$1 - $200	
Esterline Corp - Stock	$1,001 - $15,000	None	None	
Merrill Lynch CMA	$15,001 - $50,000	Interest	$201 - $1,000	
Merrill Lynch Basic Value Fund - Mutual Fund	$15,001 - $50,000	Capital Gains	$201 - $1,000	
Merrill Lynch Basic Value Fund - Mutual Fund	$15,001 - $50,000	Interest	$201 - $1,000	
Muniyield Arizona Fund	$15,001 - $50,000	Interest	$1,001 - $2,500	
Easton Vance Greater China Growth Fund	$1,001 - $15,000	Dividends	None	
Pilgrim Small Cap Grown Fund (formerly Nicholas Applegate Emerging Growth Fund)	$1,001 - $15,000	Capital Gains	$1,001 - $2,500	S
Merrill Lynch Special Value Focus	$1,001 - $15,000	None	None	
Global Strategy Focus Fund	$1,001 - $15,000	None	None	
H&W International VIP	$1,001 - $15,000	None	None	
Merrill Lynch Prime Bond Fund	$1,001 - $15,000	None	None	
Merrill Lynch Quality Equity	$15,001 - $50,000	None	None	
ML Corporate Bonds	$15,001 - $50,000	Interest	$1,001 - $2,500	
Pacific Telesis - PFD Stock	$1,001 - $15,000	Dividends	$201 - $1,000	
BSCH Finance, LTD - PFD Stock (formerly Santander Finance, LTD - PFD Stock)	$1,001 - $15,000	Dividends	$201 - $1,000	
Alliance Workwide Privitization Fund	$15,001 - $50,000	Dividends	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

ATM Global Telecommunications & Technology Fund (formerly GT Global Telecommunications Fund)	$1,001 - $15,000	None	None	
Merrill Lynch Basic Value Fund	$15,001 - $50,000	Dividends	$201 - $1,000	
Merrill Lynch Global Allocation	$15,001 - $50,000	Dividends	$201 - $1,000	
Retirement Account Money Fund	$1,001 - $15,000	Interest	$201 - $1,000	
Scudder Latin America Fund	$1,001 - $15,000	Dividends	$1 - $200	
Evergreen Blue Chip Fund	$1,001 - $15,000	Interest	None	

Name James Thomas Kolbe	Page 1 of 1

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Andrew Corp - Stock	Sold	Dec 12, 1999	$1,001 - $15,000
	Pilgrim Small Cap Growth Fund (formerly Nicholas Applegate Emerging Growth Fund)	Sold	Dec 27, 1999	$15,001 - $50,000

Name James Thomas Kolbe | Page 1 of 1

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities spouse, or the child, parent, or sibling of you or your spouse Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000

Name	Page	of

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name James Thomas Kolbe | Page 1 of 1

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
TransAtlantic Policy Network	March 26-April 1	DC-Florence, Italy-Rome, Italy-DC	Y	Y	N	None
Ripon Educational Fund	August 13-21	DC-Stockholm, Sweden-Zurich, Switzerland-DC	Y	Y	N	None
International Republican Institute	August 21-24	Zurich, Switzerland-Bucharest, Romania-Zurich, Switzerland	Y	Y	N	None
Harvard University	October 15	DC-Boston, MA-DC	N	N	N	None
Congressional Economic Leadership Institute	November 29-December 4	Tucson, AZ-Seattle, WA-Tucson, AZ	N	N	N	None
Caribbean/Latin American Action	December 7-9	DC-Miami, FL-Tucson, AZ	Y	N	N	None
Renaissance Weekend	December 28-January 2, 2000	DC-Hilton Head, SC-DC (transportation NOT provided)	Y	Y	N	1 Day

Name James Thomas Kolbe	Page 1 of 1

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Trustee	Embry-Riddle Aeronautical University, Daytona Beach, FL
Board of Directors	Community Food Bank, Tucson, AZ
Board of Directors	Wright Flight, Tucson, AZ
Board of Directors	International Republican Institute, Washington, DC

Name

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

RECEIVED

00 MAY 15 PM 6:30

(3)

MC HAND DELIVERED (Office Use Only)

DENNIS J. KUCINICH (Full Name)

12217 MILAN AVE. (Mailing Address)

CLEVELAND, OH. 44111 216-228-8850 Daytime Telephone

Filer Status	[✓] Member of the U.S. House of Representatives	State District	[ ] Officer or Employee — Employing Office
Report Type	[✓] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [✓]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [✓] No [ ]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [✓] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [✓]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [✓] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [✓]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [✓] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [✓]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [✓]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS (N/A)

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [✓]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [✓]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dennis J. Kucinich	5/15/00

2554

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations Wash , D C XYZ Magazine	Speech Article	Feb 2 1999 Aug 13 1999	$2 000 $500
K MART FOUNDATION FOR: PARMA, OHIO, DARE PROGRAM	PERSONAL APPEARANCE	9/22/99	$500
PROGRESSIVE MAGAZINE FOR: NORTHCOAST HEALTH MINISTRY, CLEVE., OH	ARTICLE	6/15/99	$500
LOYOLA LAW SCHOOL FOR: ST. STANISLAUS CHURCH BUILDING FUND, CLEVELAND, OH	SPEECH	12/2/99	$750
LOYOLA LAW SCHOOL FOR: ST JOHN CANTIUS CHURCH BUILDING FUND, CLEVE.,	SPEECH	12/2/99	$750
LOYOLA LAW SCHOOL FOR: HARRISON ELEMENTARY SCHOOL, THEATRE PROG. LAKEWOOD, OHIO	SPEECH	12/2/99	$500

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Name DENNIS J. KUCINICH | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP/DC/JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction
SP	Mega Corp. Stock					X								X																		P, S, E
DC, JT	Examples: Simon & Schuster		Indefinite																	Royalties									X			P
	1st Bank of Paducah, KY accounts						X									X									X							
	OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM			X																PERS RET. FUND	X											
	AMERICAN CRATING LOCK EASTLAKE, OHIO		X											X								X										
	THIRD FEDERAL SAVINGS AND LOAN, CLEVELAND, OH			X												X							X									

For additional assets and unearned income, use next page.

2556

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example. First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	JAMES CARNEY, JR; CLEVE, OH.	PERSONAL LOAN		X								
	SHIRLEY PARKER; LOS ANGELES	PERSONAL LOAN		X								
	AMERICAN EXPRESS, ¢	CREDIT CARD	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	BALTIC-AMER. LEAGUE, LA	MARCH 19-21	WASH. DC - LA - CLEVELAND	N	Y	N	N
	WM. KUNTSLER FUND, NYC	NOV. 15, 1999	WASH, DC, - NYC - WASH, DC	Y	Y	N	N
	LOYOLA COLLEGE OF LAW, LA	DEC. 2-3	SEATTLE - LA - CLEVE.	N	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 APR 27 PM 4:35
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC APR 20 2000 (8)
(Office Use Only)

STEVEN T. KUYKENDALL
(Full Name)
6544 LOCKLENNA LANE
(Mailing Address)
RANCHO PALOS VERDES, CA 90275
(202) 225-8220
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 36	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS— Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	[signature]	April 18, 2000

2559

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	SOUTHERN CALIFORNIA PERMANENTE MEDICAL GROUP	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction P, S, E
SP, DC, JT	*Examples* SP Mega Corp Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
SP	VANGUARD/WELLINGTON FUND					X								X		X	X								X							
	T. ROWE PRICE/EQUITY INC FUND				X									X		X	X						X									S
JT	T. ROWE PRICE/EQUITY INC FUND			X										X		X	X						X									P
DC	T. ROWE PRICE/EQUITY INC FUND			X										X		X	X					X										EDUC IRA
DC	T. ROWE PRICE/EQUITY INC FUND		X											X		X	X					X				OPENED 7/99						
DC	INVESTMENT COMPANY OF AMERICA			X										X		X	X					X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name STEVEN T. KUYKENDALL

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	INVESTMENT COMPANY OF AMERICA					X								X		X	X									X						P
	INVESTMENT COMPANY OF AM						X							X		X	X										X					P

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SCHEDULE IV — TRANSACTIONS

Name STEVEN T. KUYKENDALL

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10-12-99		X								
	T. ROWE PRICE / EQUITY INCOME FUND		X		3-31-99		X								
	INVESTMENT COMPANY OF AMERICA	X			4-7-99		X								
JT	T. ROWE PRICE / EQUITY INCOME FUND	X			QUARTLY. MONTHLY	X		DIVIDEND REINVESTMENT & MONTHLY PURCHASES							
SP	INVESTMENT COMPANY OF AMERICA	X			QUARTERLY	X		DIVIDEND REINVESTMENT							
	INVESTMENT COMPANY OF AMERICA	X			"		X	DIVIDEND REINVESTMENT							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	AT&T UNIVERSAL CARD	CREDIT CARD - REVOLVING	X									
JT	FIRST USA BANK	CREDIT CARD - REVOLVING		X								
	DAVID BUXTON FINANCIAL CORPORATION	LOAN			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash, D C —Chicago—Wash, D C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash, D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	THE ASPEN INSTITUTE	MAR 19-21	WASH., DC. HERSHEY PA. WASH DC BIPARTISAN CONGRESSIONAL RETREAT	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
DIRECTOR	CALIFORNIA CONSORTIUM OF EDUCATION FOUNDATIONS — RESIGNED EFFECTIVE 5/10/99

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-751 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

00 MAY 15 PM 3:53

(10)

John J. LaFalce
(Full Name)

2310 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202-225-3231

HAND DELIVERED
(Office Use Only)

Filer Status				
	[X] Member of the U.S. House of Representatives	State NY District 29	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e. aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [ ] No [X]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John J. LaFalce	5/15/00

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	New York State Teachers Retirement System	Spouse retirement	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP DC *Examples* SP Mega Corp Stock JT 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
AOL	$15,001 - $50,000	N/A	None	P
Ariba	$50,001 - $100,000	N/A	None	p
Summit Technology	$15,001 - $50,000	N/A	None	P
Ciber	$15,001 - $50,000	N/A	None	P
China Telecom	$100,001 - $250,000	N/A	None	NA
Chemdex	$50,001 - $100,000	N/A	None	P
Centura	$1,001 - $15,000	N/A	None	P

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Corel Corp.	$15,001 - $50,000	N/A	None	P
Comptek Research	$50,001 - $100,000	N/A	None	S
Fidelity Asset Manager: Aggressive	$15,001 - $50,000	Capital Gains/ Dividends	$1,001 - $2,500	P
Fidelity Select Computers	$15,001 - $50,000	Capital Gains/Dividends	$1,001 - $2,500	P
Fidelity Aggressive Growth	$15,001 - $50,000	Capital Gains/ Dividends	$1,001 - $2,500	P
Fidelity Select Developing Comm	$15,001 - $50,000	Capital Gains / Dividends	$201 - $1,000	P
Corning	$50,001 - $100,000	N/A	None	S
Internet Capital	$100,001 - $250,000	N/A	None	P
Infosys Tech	$15,001 - $50,000	Dividends	$1 - $200	P
Looksmart	$1,001 - $15,000	N/A	None	P
Merrill Lynch Global Technology B	$15,001 - $50,000	N/A	None	NA
Merrill Lynch Global Technology D	$1,001 - $15,000	N/A	None	NA
MLF Amex	$1,001 - $15,000	N/A	None	NA
Metrocall	$15,001 - $50,000	N/A	None	P
Motorola	$50,001 - $100,000	Dividends	$201 - $1,000	NA
Microsoft	$50,001 - $100,000	Capital Gains	$1,001 - $2,500	P AND S
Network Associates	$15,001 - $50,000	N/A	None	S
Nextel	$100,001 - $250,000	N/A	None	NA
Oracle	$250,001 - $500,000	N/A	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

PurchasePro	$50,001 - $100,000	N/A	None	P
QLT Phototherapeutics	$50,001 - $100,000	N/A	None	P
Red Hat	$15,001 - $50,000	N/A	None	P
Somnus Medical Technologies	$1,001 - $15,000	N/A	None	NA
Telemate	$15,001 - $50,000	N/A	None	P
VerticalNet	$15,001 - $50,000	N/A	None	NA
Verisign	$50,001 - $100,000	N/A	None	NA
Yahoo	$15,001 - $50,000	N/A	None	P
Fidelity Hong Kong & China Fund	None	Capital Gains	$5,001 - $15,000	S
Gibraltar Steel	None	Capital gains/dividends	$15,001 - $50,000	S
Computer Associates	None	Capital Gains/Dividends	$5,001 - $15,000	S
Centocor	None	Capital Gains	$5,001 - $15,000	S
Commscope	None	Capital Gains	$2,501 - $5,000	S
Healthplan Services	None	Dividends	$201 - $1,000	S
Pfizer	None	Capital Gains	$5,001 - $15,000	P AND S
VISX Inc	None	Capital Gains	$15,001 - $50,000	S
SPECTRX	None	Capital Gains	$201 - $1,000	P AND S
Warner Lambert	None	Capital Gains	$5,001 - $15,000	P AND S
Staples	None	Capital Gains	$201 - $1,000	P AND S
Delphi Auto Systems	None	Dividends	$1 - $200	P AND S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Putnam Investment Fund B	$15,001 - $50,000	Capital Gains	$1 - $200	P
	None		None	NA
	None		None	NA
ML Retirement Reserves Money Market	$1,001 - $15,000	Dividends	$201 - $1,000	NA
ML Cash Management Money Market	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
Prudential Money Mart Assets	$1 - $1,000	Dividends	$1,001 - $2,500	NA
Morgan Stanley Active Assets Moneymkt	$1,001 - $15,000	Dividends	$201 - $1,000	NA
Sports Trac, Inc (Bridge Loan) 6900 E Bellview Avenue Englewood, CO	$1,001 - $15,000	N/A	None	NA
Lockport Savings Bank	$1,001 - $15,000	Interest	$1 - $200	NA
M & T Bank Savings Account	$50,001 - $100,000	Interest	$2,501 - $5,000	NA
Congressional Federal Credit Union	$1,001 - $15,000	Interest	None	NA
Colonial Manor Condo	$15,001 - $50,000	Rent	$2,501 - $5,000	NA
New York State College Savings Progam (for Martin LaFalce)	$1,001 - $15,000	Dividends	$201 - $1,000	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	AOL	Purchase	6/21/99	$1,001 - $15,000
	AOL	Purchase	7/28/99	$1,001 - $15,000
	AOL	Purchase	8/5/99	$1,001 - $15,000
	Ariba	Purchase	9/24/99	$15,001 - $50,000
	Summit Technology	Purchase	7/22/99	$15,001 - $50,000
	Summit Technology	Purchase	7/27/99	$15,001 - $50,000
	Chemdex	Purchase	10/8/99	$15,001 - $50,000
	Centura	Purchase	11/15/99	$1,001 - $15,000
	Centura	Purchase	11/16/99	$1,001 - $15,000
	Corel Corp	Purchase	11/15/99	$1,001 - $15,000
	Corel Corp.	Purchase	11/16/99	$1,001 - $15,000
	Comptek Research	Sold	11/15/99	$15,001 - $50,000
	Fidelity Asset Manager. Aggr.	Purchase	10/7/99	$15,001 - $50,000
	Fidelity Select Computers	Purchase	10/7/99	$15,001 - $50,000
	Fidelity Agressive Growth	Purchase	10/7/99	$15,001 - $50,000
	Fidelity Select Dev Comm.	Purchase	10/7/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Corning	Sold	2-1-99	$15,001 - $50,000
	Internet Capital	Purchase	9/21/99	$15,001 - $50,000
	Infosys Tech	Purchase	11/5/99	$15,001 - $50,000
	Looksmart	Purchase	11/16/99	$15,001 - $50,000
	Metrocall	Purchase	9/2/99	$1,001 - $15,000
	Metrocall	Purchase	11/10/99	$1,001 - $15,000
	Microsoft	Purchase	5/25/99	$15,001 - $50,000
	Microsoft	Sold	11/15/99	$15,001 - $50,000
	Network Associates	Sold	7-8-99	$15,001 - $50,000
	PurchasePro	Purchase	11/10/99	$15,001 - $50,000
	QLT Phototherapeutics	Purchase	11/10/99	$15,001 - $50,000
	QLT Phototherepeutics	Purchase	11/18/99	$15,001 - $50,000
	Red Hat	Purchase	11/11/99	$1,001 - $15,000
	Telemate	Purchase	11/15/99	$15,001 - $50,000
	VerticalNet	Purchase	11/11/99	$1,001 - $15,000
	Verisign	Purchase	11/8/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Yahoo	Purchase	7-28-99	$1,001 - $15,000
	Fidelity Hong Kong & China Fund	Sold	10/7/99	$50,001 - $100,000
	Gibraltar Steel	Sold	6-30-99	$50,001 - $100,000
	Gibraltar Steel	Sold	7-9-99	$15,001 - $50,000
	Gibraltar Steel	Sold	11-10-99	$15,001 - $50,000
	Computer Associates	Sold	6-11-99	$15,001 - $50,000
	Centocor	Sold	7-21-99	$50,001 - $100,000
	Commscope	Sold	2-22-99	$15,001 - $50,000
	Iridium	Sold	11-23-99	$1,001 - $15,000
	Healthplan Services	Sold	11-15-99	$1,001 - $15,000
	Vanstar (Inacom)	Sold	11-15-99	$1,001 - $15,000
	Pfizer	Purchase	5-25-99	$1,001 - $15,000
	Pfizer	Sold	9-7-99	$50,001 - $100,000
	VISX Inc.	Sold	4-15-99	$15,001 - $50,000
	SPECTRX	Purchase	8-25-99	$1,001 - $15,000
	SPECTRX	Sold	11-15-99	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Warner Lambert	Purchase	4-20-99	$15,001 - $50,000
	Warner Lambert	Sold	11-8-99	$15,001 - $50,000
	Staples	Purchase	11-10-99	$15,001 - $50,000
	Staples	Sold	12-28-99	$15,001 - $50,000
	Computer Task	Purchase	7-15-99	$15,001 - $50,000
	Computer Task	Sold	11/10/99	$1,001 - $15,000
	Delphi Auto Systems	Purchase	6/15/99	$15,001 - $50,000
	Delphi Auto Systems	Sold	11/10/99	$15,001 - $50,000
	Putnam Inv. Fund B	Purchase	3/5/99	$15,001 - $50,000

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2577

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Ray H. LaHood
(Full Name)

329 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-6201

Filer Status	[X] Member of the U.S. House of Representatives	State: IL District: 18	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 15, 2000

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	National City Illinois Trust Company	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$ 500
The K-Mart Family Foundation Donated to Peoria Police Dept. - DARE Program	Participant/K-Mart Kids Race Against Drugs	9/22/99	$500.00
American University/Dubai Donated to Bradley University	Speech	5/30/99	$2,000.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
SP	Natl. City Savings & Investment Plan	None	Deferred Not Self directed	NA	NA
SP	Natl. City Retirement Plan	None	Deferred Not Self directed	NA	NA
	Amer. Classic Voyager (200)	$1,001 - $15,000	Capital Gains	$2,501 - $5,000	NA
	Amer. Stores (100)	$1,001 - $15,000	Capital Gains	None	S
	Wolverine World Wide (100)	$1,001 - $15,000	Capital Gains	$1,001 - $2,500	NA
	America West (100)	$1,001 - $15,000	Capital Gains	None	P
	Ikon Office Solutions (200)	$1,001 - $15,000	Capital Gains	None	P

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Keystone (100)	$1 - $1,000	Capital Gains	None	P
RLI Corp. (100)	$1,001 - $15,000	Capital Gains	None	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	National City Savings & Investment Plan	Exchange	NA/Not self directed	$50,001 - $100,000
SP	Natl. City Retirement Plan	Exchange	NA/Not self directed	$15,001 - $50,000
	Amer. Stores (100)	Sold	12/01/99	~~$1,001 - $15,000~~ Sold at a loss
	America West (100	Purchase	2/22/99	$1,001 - $15,000
	Ikon Office Solu. (200)	Purchase	12/01/99	$1,001 - $15,000
	Keystone (100)	Purchase	4/12/99	~~$1,001 - $15,000~~ Less than $1,000
	RLI Corporation (100)	Purchase	5/24/99	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor *Example:* First Bank of Wilmington, Delaware	Type of Liability Mortgage on 123 Main St., Dover, Del.	Amount of Liability $100,001 - $250,000
	Morton Comm. Bank/Morton, IL	Student Loan	$50,001 - $100,000
JT	Citizens Equity Fed Credit Union	Revolving Loan	$10,001 - $15,000
JT	Sallie MAE	Student Loan	$15,001 - $50,000
JT	Direct Loans	Student Loan	$10,001 - $15,000
	Pontiac Natl. Bank, Pontiac, IL	Short Term/Misc Exp	$15,001 - $50,000
	Citizens Natl Bank, Toluca, IL	Student Loan	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Amer. Univ. in Dubai	5/27-31/99	Wash.DC-Dubai-Wash,DC	Y	Y	Y-Spouse	None
The Aspen Institute	3/19-21/99	Wash.DC-Hershey, PA-Wash.DC	Y	Y	Y-Spouse	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Trustee (Unpaid)	Gallaudet University
Trustee (Unpaid)	Bradley University

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RECORDS CENTER
00 MAY 15 PM 6:44
OFFICE OF THE CLERK

(9)
HAND DELIVERED
MC (Office Use Only)

Nicholas V. LAMPSON
(Full Name)

8350 Collier Road
(Mailing Address)

Beaumont, TX 77706

Daytime Telephone (202) 225-6565

Filer Status	[X] Member of the U.S. House of Representatives	State District: Texas 9	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Nicholas V. Lampson	MAY 15, 2000

2586

Name	Nicholas V. Lampson	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Beaumont Independant School District	Spouse Salary	34,600

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500

This page may be copied if more space is required.

Name Nicholas V. LAMPSON

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples* SP Mega Corp Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	Congress. Fed.Cr.Un			X												X						X										
	Jefferson Co. Employee																															
	Credit Union		X													X								X								
	TX Co. Dist. Retirement																															
	System						X														X											
	Thrift Saving Plan				X																											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nicholas V. Lampson

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	1038 Park Meadow Beaumont, TX					X									X											X						
JT	Prutzman Sq. #24c Beaumont, TX				X										X									X								
JT	Prutzman Sq. #25d Beaumont, TX				X										X									X								
	Note Receivable - Keith Broussard				X																X											

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SCHEDULE IV — TRANSACTIONS

Name Nicholas V. Lampson

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								

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Name Nicholas V. Lampson

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	*First Bank of Wilmington, Delaware*	*Mortgage on 123 Main St., Dover, Del*				X						
	Jefferson County Credit Union	Personal LOAN	X									
	Chase Bank, Beaumont TX	Prutzman SO . Townhomes		X								
	G MAC Mortgage Corp., Waterloo IA	1038 Parkmeadow		X								
	W. G. Hall, Dickinson TX	Personal LOAN		X								
	Beaumont Area Education C.U.	Personal LOAN	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example *Mr. Joseph H. Smith, Anytown, Anystate*	*Silver Platter (determination on personal friendship received from Committee on Standards)*	*$270*
N/A		

Use additional sheets if more space is required.

Name Nicholas V. Lampson | Page 6 of 7

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	N/A						
	Center for Int Policy	8-31/9-3	D.C - Havana DC	Y	Y	N	
	Italian American Inst	3/30/4-5	DC - Rome - DC	Y	Y	Y	
	Aspen Inst	3-19/3-21	DC - Hershey - DC (Rem)	Y	Y	Y	

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

Congress of the United States
House of Representatives
Washington, DC 20515–4309

NICK LAMPSON
9TH DISTRICT, TEXAS

COMMITTEE ON TRANSPORTATION

COMMITTEE ON SCIENCE

MISSING AND EXPLOITED CHILDREN'S CAUCUS

May 25, 2000

The Clerk of the House of Representatives
Legislative Resource Center
B106 Cannon House Office Building
Washington, D.C. 20515-6612

Dear Clerk of the House of Representatives,

Please substitute the enclosed and corrected version of page five for my 1999 financial disclosure forms. The new version should read, "Keith Broussard, Beaumont Texas." I apologize for the inconvenience and thank you for your assistance and understanding.

Sincerely,

NICK LAMPSON
Member of Congress

HAND DELIVERED

RECEIVED
00 MAY 25 PM 2:58

WASHINGTON OFFICE: 417 CANNON HOUSE OFFICE BUILDING, WASHINGTON, DC 20515–4309 (202) 225–6565
HOME OFFICES:
300 WILLOW, SUITE 322, BEAUMONT, TX 77701 (409) 838–0061
601 ROSENBERG, SUITE 216, GALVESTON, TX 77550 (409) 762–5877
TOLL FREE 888–838–0061

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nicholas V. Lampson

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	1038 Park Meadow Beaumont, TX					X									X											X						
JT	Prutzman Sq. #24c Beaumont, TX				X										X									X								
JT	Prutzman Sq. #25d Beaumont, TX				X										X									X								
	Note Receivable - Keith Broussard Beaumont Texas				X																X											

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CENTER
00 MAY 22 PM 1:46

Thomas Peter Lantos
(Full Name)

2217 Rayburn House Office Bldg, Washinton, DC 20515 225-3531
(Mailing Address) Daytime Telephone

HAND DELIVERED
(Office Use Only)

Filer Status	[XX] Member of the U S House of Representatives	State CA District 12	[ ] Officer or Employee	Employing Office
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [XX]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [XX]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [XX]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [XX]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [XX]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [XX]	No [ ]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [XX]	No [ ]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [XX]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S.C. app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Thomas P Lantos	5/22/2000

2597

SCHEDULE I – EARNED INCOME

Source	Type	Amount
State of California Public Systems	Pension	12,518
California Teachers Association	Pension	13,735

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

	Asset and/or Income Source	Value of Asset	Type of Income	Amount of Income	Transaction
	Keogh Retirement - Merrill Lynch				
	(1) Allstate Corp Del	C	Dividends	II	
	(2) Morgan Stanely Dean Witter Disc	C	Dividends	II	
	(3) Sears Roebuck	C	Dividends	II	
	(4) U.S. Airways Group Del $1	D	Dividends	N/A	P
JT	Merrill Lynch Cash Mgmt. Account - CMA Government Fund	G	Dividends	VII	
	IRA (self) M Lynch - Merrill Lynch - USA Government Fund	D	Dividends	IV	
SP	IRA -(spouse) Merrill Lynch - Merrill Lynch USA Government Fund				
	(1) Merrill Lynch USA Government Fund	B	Dividends	III	
	(2) Boeing Company	D	Dividends	III	P
JT	Wright-Patman Congressional Federal Credit Union- Money Market, Checking, and Savings Account	G	Interest	IV	

JT	Charles Schwab Brokerage Account				
	(1) Boeing Co	F	Dividends	III	P
	(2) Disney Walt HLDG CO	D	N/A	N/A	P
	(3) ESC Medical SYS ORD F	D	N/A	N/A	P
	(4) Glenborough RLTY TR INC	D	N/A	N/A	P
	(5) Glenborough A 7.75% PFD CONV SER A PFD	D	Capital Gains	I	P
			Dividends	III	
	(6) Lockheed Martin Corp	C	Dividends	II	P
	(7) Raytheon CO new CL A Class A	C	N/A	N/A	P
	(8) Xerox Corp	D	N/A	N/A	P
	(9) Charles Schwab Money Market Fund	C	Dividends	V	
JT	1230 Southdown Road Hillsborough, CA 94010	I	Rent	VII	
SP	210 Justice Court Washington, DC	F	Rent	VI	
SP	Estate of Mary Szasz -- Property inherited by Spouse after Spouse's Mother passed away.				
	(1) Condominium - 210 McMullen #602 Vancouver, B.C.	F	N/A	N/A	Inheritance
	(2) Multi-Unit Apartment Building -- 5940 Balzam Vancouver, B.C.	I	Rent	VIII	Inheritance

SCHEDULE IV – TRANSACTIONS

	Asset	Type of Transaction	Date	Amount of Transaction
	U.S. Airways Group Del $1	P	9/27/99	C
	Boeing Co	P	2/25/99	B
	ESC medical SYS ORD F	P	2/25/99	C
	Boeing Co	P	11/8/99	C
	Glenborough RLTY TR IN	P	11/8/99	C
	Xerox Corp	P	11/8/99	B
	Boeing Co	P	11/16/99	C
	Lockheed Martin Corp	P	11/16/99	B
	Disney Holding Co	P	11/18/99	C
	Boeing Co	P	11/23/99	C
	Glenborough A 7.75% PFD	P	11/29/99	C
	Xerox Corp	P	12/16/99	B
	Raytheon	P	11/16/99	B
	Condominium -- 2101 McMullen #602 Vancouver, B.C.	Inheritance	1/19/99	E
	Multi-Unit Apartment Building -- 5940 Balzam Vancouver, B.C.	Inheritance	1/19/99	H

SCHEDULE VII – TRAVEL PAYMENTS AND REIMBURSEMENTS

Source	Date(s)	Point of Departure-Destination-Point of Return	Lodging (Y/N)	Food (Y/N)	Family Member	Any time not at sponsor's expense
The Peres Peace Center	Jan. 7-13	DC-Budapest; Budapest-Tel Aviv	Y	Y	Y	Two Days
Int'l Mgmt. & Development Institute	Jan. 14-20	Tel Aviv - Berlin-Copenhagen-SF	Y	Y	Y	Four Days
The Shoah Foundation	Jan. 25-28	SF-LA-SF-Denver-DC	Y	Y	Y	N
The Shoah Foundation	Feb. 1-2	DC-Chicago-DC	Y	Y	Y	N
The Shoah Foundation	Feb. 3-6	DC-NY-DC	Y	Y	Y	N
Central European University	March 26-April 13	DC-Budapest-Copenhagen-DC	N	N	Y	Fourteen days
UNESCO	May 27-June 7	DC-Paris-Copenhagen-DC	Y	Y	Y	Seven Days
Int'l Mgmt. & Development Institute	July 2-12	DC-Copenhagen-DC	N	Y	Y	Eight Days
Int'l Mgmt. & Development Institute	August 12-Sept. 1	DC-Copenhagen-Helsinki-[Copenhagen-DC]	Y	Y	Y	Seventeen Days
Ambrosetti Group Seminar	Sept. 2-4	Budapest-Milan-Moscow	Y	Y	Y	N

Russian Jewish Congress	Sept. 4-7	Moscow-Copenhagen	Y	Y	Y	N
The William Davidson Inst., U. of Michigan	Nov. 1	DC-Detroit-DC	N	Y	N	N
The Childrens' Place at Home Safe	Dec. 6-7	SF-West Palm Beach, FL-DC	N	Y	Y	N
Central European University	Dec. 13-14	DC-NY-DC	Y	Y	Y	N

SCHEDULE VIII - POSITIONS

Board Member (uncompensated)	Peres Peace Center
Board Member (uncompensated)	William Davidson Institute - University of Michigan Business School
Board Member (uncompensated)	Central European University

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 18 PM 12:42
CLERK
HOUSE OF REPRESENTATIVES

MC
MAY 15 2000 (Office Use Only)
27

Stephen Michael Largent (Full Name)

6150 S. Louisville Tulsa, OK 74136 (Mailing Address)

(918) 492-0106 Daytime Telephone

Accountant to contact: Steve Jay (918) 492-0106

Filer Status	[ ] Member of the U S House of Representatives	State OK District #1	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Stephen Michael Largent	May 12, 2000

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Profootball Hall of Fame	Card Signings	1,000
	Players, Inc.	"	17,257
	International Sports Marketing	"	3,750
	White NFL Settlement Plan B (Note 1)	Litigation Settlement	559
	NFL Films (Note 2)	Card Signings	500
	H.O.F. Cards - I LLC (Note 2)	"	1,000

Note 1: Deferred income earned prior to election to House of Representatives. Not subject to earned income limitations.

Note 2: Contributed to charity.

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name: Stephen Michael Largent

BLOCK A Asset and /or Income Source	BLOCK B Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E TRANSACTION
	A NONE	B $1-$1000	C $1001-$15000	D $15001-$50000	E $50001-$100000	F $100001-$250000	G $250001-$500000	H $500001-$1000000	I $1000001-$5000000	J $5000001-$25000000	K $25000001-$50000000	L OVER $50000000								I NONE	II $1-$1000	III $1001-$15000	IV $15001-$50000	V $50001-$100000	VI $100001-$250000	VII $250001-$500000	VIII $500001-$1000000	IX $1000001-$5000000	X $5000001-$25000000	XI OVER $25000000	
													Dividends	Interest	Rent	Capital Gains	Excepted Trust	Excepted Trust Beneficiary	Other												
Merrill Lynch CMA	X												X									X									
Fidelity Money Market Fund				X											X							X									
American Bank and Trust			X												X							X									
Local America Bank			X												X						X										
Pimco Total Return Fund				X									X			X							X								
FERS, Thrift Plan					X								X		X								X								
Exxon Stock				X									X									X									
CIFRA S.A.	X															X				X											S
Home Depot Inc.	X												X								X										S
Sara Lee Corp	X												X										X								S
Wal Mart Stores Inc.			X										X								X										
Williams Companies			X										X								X										
Federal Government Retirement Plan			X												X							X									
Congressional Federal Credit Union			X												X						X										
Note Receivable, Ray Tedford	X														X					X											
Wells I Ltd Partnership			X											X						X											
Concord Ltd					X										X				X							X					
Kings River Ranch, Partnership Note Rec	X														X	X					X										S
CNL II Ltd Partnerhip				X										X	X								X								
CNL VI Ltd Partnerhip				X										X	X								X								
Mid-America Apts, LP			X											X	X										X						
Cash surrender Value of life insurance				X									X										X								
Numismatic Coins				X												X				X											
Gold & Silver				X												X				X											
Screen Actors Guild			X																X				X								

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name: Stephen Michael Largent

BLOCK A Asset and /or Income Source	BLOCK B Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E TRANSACTION
	A NONE	B $1	C $1-$2	D $2-$5	E $5-$10	F $10-$15	G $15-$20	H $20-$25	I $25-$30	J $30-$35	K $35-$40	L OVER $40							I	II	III	IV	V	VI	VII	VIII	IX	X	XI
Northcreek Investment Ltd. Partnershi	X												X	X	X			X											P,S,E
Mutual Series Inc. IRA	X														X														E
Mutual Series Inc. IRA	X														X														E
Bert Bell NFL Retirement Plan						X											X							X					
Capital World Growth & Income Fund					X							X			X						X								
GO2 Net Inc				X											X			X			X								P
Capital Income Builder fund				X								X			X						X								
AIM Charter Fund					X							X			X								X						
Merrill Lunch Floating Rate fund		X										X			X					X									
Compaq Computer Corp			X									X			X					X									P
GO2 Net Inc				X											X			X											P
Merck & Co Inc			X									X								X									P
Russell Tax Exempt Bond Fund							X					X			X									X					P,S,E
Russell Equity I Fund						X						X			X									X					P,S,E
Russell Equity II Fund				X								X			X						X								P,S,E
Russell Equity Q Fund						X						X			X									X					P,S,E
Russell Fixed Income I Fund							X					X			X									X					P,S,E
Russell Fixed Income III Fund						X						X											X						P,S,E
Vanguard Life Strategy Fund, IRA							X					X			X						X								E
Russell International Fund						X						X			X								X						P,S,E
Russell Equity T Fund							X					X			X											X			P,S,E
Russell Real Estate Sec Fund						X						X			X								X						P,S,E
Russell Tax-Free Money Market Fund			X									X										X							P,S,E
One Glen Lakes, Ltd		X											X	X	X												X		
Lake Stella Associates, Ltd		X												X						X									

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BLOCK A Asset and /or Income Source	BLOCK B Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E TRANSACTION
	A NONE	B $1-$1000	C $1001-$5000	D $5001-$15000	E $15001-$50000	F $50001-$100000	G $100001-$250000	H $250001-$500000	I $500001-$1000000	J $1000001-$5000000	K OVER $5000000	L	DIVIDENDS	RENTS	INTEREST	CAPITAL GAINS	FARM	BUSINESS OR PROFESSION	OTHER	A $1-$1000	B $1001-$2500	C $2501-$5000	D $5001-$15000	E $15001-$50000	F $50001-$100000	G $100001-$250000	H $250001-$500000	I $500001-$1000000	J OVER $1000000		
Russell Equity II	X												X			X					X										E
Russell Equity I				X									X			X									X						P,S
Russell Equity Q				X									X			X									X						P,S
Russell Fixed Income I				X									X			X									X						P,S
Russell Fixed Income III	X												X										X								P,S
Russell International				X									X			X								X							P,S
Russell Real Estate Sec			X										X			X								X							P,S
Russell Tax Free Money Market	X												X								X										S
Merrill Lynch CMA			X										X			X					X										
CNL Income Fund II			X											X	X									X							
Vanguard Growth & Income Fund			X										X			X							X								E
Federal Home Loan Mtg Corp				X											X	X								X							P,S,E
Vanguard Wellington Fund					X								X			X										X					P,S,E
Farm							X										X											X			
Vanguard Muni Bond Fund			X												X	X							X								P,S,E
Rent deposit			X												X					X											
Vanguard Prime Portfolio			X										X			X							X								P,S,E
Franklin Class Z	X												X			X										X					S
FNMA Debentures			X											X										X							P
U. S. Treasurey Notes				X										X										X							
Solomon Smith Barney Bonds				X										X									X								
A T & T Common Stock			X										X			X							X								
Amgen Inc Common Stock	X															X				X											S

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name: Stephen Michael Largent

BLOCK A Asset and /or Income Source	BLOCK B Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E TRANSACTION
	A NONE	B $1-$1,000	C $1,001-$15,000	D $15,001-$50,000	E $50,001-$100,000	F $100,001-$250,000	G $250,001-$500,000	H $500,001-$1,000,000	I $1,000,001-$5,000,000	J $5,000,001-$25,000,000	K $25,000,001-$50,000,000	L Over $50,000,000	Dividends	Rent	Interest	Capital Gain	Royalty	Business Income	I None	II $1-$200	III $201-$1,000	IV $1,001-$2,500	V $2,501-$5,000	VI $5,001-$15,000	VII $15,001-$50,000	VIII $50,001-$100,000	IX $100,001-$1,000,000	X $1,000,001-$5,000,000	XI Over $5,000,000	
Amoco Corp Common Stock			X										X			X						X								
Archer Danials Midland Common Sto	X												X			X				X										S
Beckman Coulter, Inc Common Stock			X										X			X				X										
H & R Block Common Stock			X										X			X				X										
Carolina Power Lgt Common Stock	X												X			X			X											S
Chevron Corp Common Stock			X										X			X				X										
Conagra Inc Common Stock			X										X			X				X										
Corning Inc Common Stock	X												X			X				X										S
Dun & Bradstreet Crp Del			X										X			X				X										
Dow Chemical PV	X												X			X				X										S
Electr Data Sys Corp Common Stock	X												X			X				X										S
Emerson Elec Co Common Stock			X										X			X				X										
GTE Corp Common Stock			X										X			X				X										
Ingersoll Rand Common Stock			X										X			X				X										
IBM Common Stock	X												X			X				X										S
Limited Inc Common Stock	X												X			X				X										S
Marsh & Mclennan Cos Inc Common	X												X			X				X										S
McDonalds Corp Common Stock			X										X			X				X										
Minnesota Mng Mfg			X										X			X				X										
Motorola Inc Common Stock	X												X			X				X										S
Nationwide Hlth PPTYs Common Stk	X												X			X			X											S
Norfolk Southern Corp Common Stock			X										X			X				X										
Phillips Petroleum Common Stock			X										X			X				X										
PRAXAIR Inc Common Stock	X												X			X				X										S
Proctor & Gamble Common Stock			X										X			X				X										

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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name: Stephen Michael Largent

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BLOCK A Asset and /or Income Source	BLOCK B Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income										BLOCK E TRANSACTION
	A None	B $1,000 or less	C $1,001-$15,000	D $15,001-$50,000	E $50,001-$100,000	F $100,001-$250,000	G $250,001-$500,000	H $500,001-$1,000,000	I $1,000,001-$5,000,000	J $5,000,001-$25,000,000	K $25,000,001-$50,000,000	L Over $50,000,000	Interest	Dividends	Rent	Royalty	Capital Gain	BLIND TRUST	OTHER	I None	II $1-$200	III $201-$1,000	IV $1,001-$2,500	V $2,501-$5,000	VI $5,001-$15,000	VII $15,001-$50,000	VIII $50,001-$100,000	IX $100,001-$1,000,000	X $1,000,001-$5,000,000	XI Over $5,000,000	
SBC Communicatns Inc PV			X										X			X					X									
Sherwin Williams Common Stock			X										X			X					X									
Tenneco Inc	X												X			X						X								S
Union Camp Corp Common Stock	X												X			X					X									S
Washington Mutual Inc Common Stock			X										X			X					X									
Wash R E Inv TR SBI	X		X										X			X					X	X								S
Whirlpool Corp Common Stock			X										X			X					X									
Associates Corp, Global Notes							X						X			X							X							P
Bank of New York			X										X			X					X									P
Compaq Computer Corp			X										X			X					X									P
Eastman Kodak			X										X			X					X									P
Eaton Corp			X										X			X					X									P
St Paul Co's Inc			X										X			X					X									P
SLM Holding Corp			X										X			X					X									P
Lucent Technologies Inc			X										X			X					X									P
Merck & Co			X										X			X					X									P
Williams Communications Group							X									X				X										P
Merrill Lynch CMA			X												X							X								

SCHEDULE IV- TRANSACTIONS

Stephen Michael Largent

ASSET	TYPE of Transaction			Date	Amount of Transaction									
	Purchase	Sale	Exchange		B	C	D	E	F	G	H	I	J	K
					$100,000	$15,000	$50,000	$100,000	$250,000	$500,000	$100,000	$500,000	$250,000	over $1,000,000
CIFRA S.A.		X		August 3, 1999	X									
Home Depot		X		March 3, 1999	X									
Sara Lee Corp		X		August 6, 1999	X									
Carolina Power Lgt Common Stock		X		December 7, 1999	X									
Compaq Computer Corp	X			July 16, 1999	X									
Eastman Kodak	X			January 7, 1999	X									
Eaton Corporation	X			January 26, 1999	X									
Lucent Technologies, Inc	X			June 23 & Nov 5, 1999	X									
Merck & Company	X			June 24, 1999	X									
St Paul Cos Inc	X			August 18, 1999	X									
SLM Holding Company	X			June 14, 1999	X									
Bank of New York	X			December 7, 1999	X									
Federal Home Loan Mortgage	X			September 22, 1999		X								
Associates, Corp Global Notes	X			Mar 11 & Sep 22, 1999		X								
Federal Natl Mortg Assn		X	X	March 25 & Sep 9, 1999			X							
Marsh & Mclennan Cos Inc Common Stk		X		January 26, 1999	X									
Nationwide Hlth PPTYs Common Stk		X		December 7, 1999	X									
PRAXAIR Inc Common Stock		X		January 26, 1999	X									
Kings River Ranch Partnership Interest		X		December 31, 1999	X									
Vanguard Life Strategy Fund, IRA			X	April 5, 1999		X								
Mutual Series Inc, IRA			X	May 14, 1999			X							
GO2 Net Inc	X			August 6, 1999	X									
GO2 Net Inc	X			August 13, 1999	X									
Note Receivable Ray Tedford		X		January, 1999			X							
Merck & Company	X			February 1, 1999										
Franklin Class Z		X		May 15, 1999		X								

SCHEDULE IV- TRANSACTIONS

Stephen Michael Largent

ASSET	TYPE of Transaction			Date	Amount of Transaction										BLOCK E TRANSACTION
					B	C	D	E	F	G	H	I	J	K	
Corning Inc		X		November 5, 1999	x										
Electra Data Sys Corp		X		November 5, 1999	x										
Motorola Inc		X		November 5, 1999	x										
Amgen Inc		X		August 18 & Mar 9, 1999	x										
Archer Daniels Inc		X		August 18, 1999	x										
International Paper		X	X	Jul 18 & May 5, 1999	x										
Dow Chemical PV		X		June 14, 1999	x										
Electra Data Sys Corp		X		June 14, 1999	x										
International Business Machines		X		June 14, 1999	x										
Limited Inc		X		Jun 15 & 23, Feb 19 1999	x										
Wash RE Inv TR SBA		X		June 14, 1999	x										
Tenneco Inc		X		March 9, 1999	x										
Union Camp Corp		X	X	February 19, 1999	x										
Merrill Lynch CD	X	X		May 5 & Oct 10, 1999					x						
Williams Communications	X			October 13, 1999					x						
Russell Tax Exempt Bond Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Equity I Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Equity II Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Equity Q Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Fixed Income I Fund	X	X	X	See detail Schedules Attached 9-14											
Russell International Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Equity T fund	X	X	X	See detail Schedules Attached 9-14											
Russell Real Estate Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Tax Free Money Market Fund	X	X	X	See detail Schedules Attached 9-14											
Russell Fixed Income III Fund	X	X	X	See detail Schedules Attached 9-14											
Vanguard Tax Exempt Fund	X	X	X	See detail Schedules Attached 10-24											
Vanguard Growth and Income Fund	X	X	X	See detail Schedules Attached 10-24											
Vanguard Prime Money Market Fund	X	X	X	See detail Schedules Attached 10-24											
Vanguard Wellington Fund	X	X	X	See detail Schedules Attached 10-24											

Ronald Blue & Co., LLC
TRANSACTION REPORT
STEVE & TERRY LARGENT
56175011
From 01-01-99 To 12-31-99

Trade Date	Asset ID	Security	Shares	Price	Total Cash Flow	Invested Capital
Purchases						
07-02-99	LVTF.FD	Tax Exempt Bond Fund	2,400.384	20.83	50,000.00	50,000.00
07-26-99	TFMM.FD	Tax-Free Money Market Fund	22,000.000	1.00	22,000.00	22,000.00
					72,000.00	**72,000.00**
Redemptions						
04-08-99	TFMM.FD	Tax-Free Money Market Fund	50,000.000	1.00	-50,000.00	-50,000.00
06-08-99	TFMM.FD	Tax-Free Money Market Fund	5,000.000	1.00	-5,000.00	-5,000.00
06-17-99	TFMM.FD	Tax-Free Money Market Fund	50,000.000	1.00	-50,000.00	-50,000.00
07-19-99	TFMM.FD	Tax-Free Money Market Fund	22,000.000	1.00	-22,000.00	-22,000.00
07-29-99	F1.FD	Fixed Income I Fund	2,407.318	20.77	-50,000.00	-50,000.00
09-14-99	TFMM.FD	Tax-Free Money Market Fund	25,000.000	1.00	-25,000.00	-25,000.00
10-29-99	F1.FD	Fixed Income I Fund	241.779	20.68	-5,000.00	-5,000.00
10-29-99	F3.FD	Fixed III Fund	510.725	9.79	-5,000.00	-5,000.00
11-15-99	LVTF.FD	Tax Exempt Bond Fund	531.401	20.70	-11,000.00	-11,000.00
					-223,000.00	**-223,000.00**
Transfer Redemptions						
12-13-99	IN.FD	International Fund	530.000	46.14	-24,454.20	-24,454.20
12-13-99	E1.FD	Equity I Fund	140.000	39.63	-5,548.20	-5,548.20
12-13-99	EQ.FD	Equity Q Fund	445.000	45.54	-20,265.30	-20,265.30
					-50,267.70	**-50,267.70**
Exchange Purchases						
12-15-99	TFMM.FD	Tax-Free Money Market Fund	5,000.000	1.00	5,000.00	5,000.00
12-28-99	TFMM.FD	Tax-Free Money Market Fund	5,500.000	1.00	5,500.00	5,500.00
					10,500.00	**10,500.00**
Exchange Redemptions						
12-15-99	F1.FD	Fixed Income I Fund	241.546	20.70	-5,000.00	-5,000.00
12-28-99	F1.FD	Fixed Income I Fund	271.337	20.27	-5,500.00	-5,500.00
					-10,500.00	**-10,500.00**
Management Fee						
01-04-99	TFMM.FD	Tax-Free Money Market Fund	4,524.000	1.00	-4,524.00	0.00
04-05-99	TFMM.FD	Tax-Free Money Market Fund	4,458.000	1.00	-4,458.00	0.00
07-01-99	TFMM.FD	Tax-Free Money Market Fund	4,413.000	1.00	-4,413.00	0.00
10-08-99	TFMM.FD	Tax-Free Money Market Fund	4,311.000	1.00	-4,311.00	0.00
					-17,706.00	**0.00**
Shareholder Servicing Fee						
01-04-99	TFMM.FD	Tax-Free Money Market Fund	692.000	1.00	-692.00	0.00
04-05-99	TFMM.FD	Tax-Free Money Market Fund	688.000	1.00	-688.00	0.00

Ronald Blue & Co., LLC
TRANSACTION REPORT
STEVE & TERRY LARGENT
56175011
From 01-01-99 To 12-31-99

Trade Date	Asset ID	Security	Shares	Price	Total Cash Flow	Invested Capital
07-01-99	TFMM.FD	Tax-Free Money Market Fund	717.000	1.00	-717.00	0.00
10-08-99	TFMM.FD	Tax-Free Money Market Fund	694.000	1.00	-694.00	0.00
					-2,791.00	**0.00**
Income - Dividend Reinvestment						
01-28-99	TFMM.FD	Tax-Free Money Market Fund	321.110	1.00	321.11	0.00
02-02-99	LVTF.FD	Tax Exempt Bond Fund	36.940	21.50	794.21	0.00
02-19-99	IN.FD	International Fund	2.051	36.54	74.95	0.00
02-19-99	RESF.FD	Real Estate Securities Fund	39.440	23.80	938.67	0.00
02-19-99	E2.FD	Equity II Fund	0.429	28.44	12.20	0.00
02-19-99	EQ.FD	Equity Q Fund	0.135	39.48	5.33	0.00
02-25-99	TFMM.FD	Tax-Free Money Market Fund	292.340	1.00	292.34	0.00
03-02-99	LVTF.FD	Tax Exempt Bond Fund	36.615	21.35	781.72	0.00
03-30-99	TFMM.FD	Tax-Free Money Market Fund	386.070	1.00	386.07	0.00
04-05-99	F1.FD	Fixed Income I Fund	333.324	21.39	7,129.81	0.00
04-05-99	F3.FD	Fixed III Fund	321.091	10.14	3,255.86	0.00
04-05-99	LVTF.FD	Tax Exempt Bond Fund	35.857	21.32	764.47	0.00
04-05-99	RESF.FD	Real Estate Securities Fund	89.622	23.29	2,087.29	0.00
04-05-99	E1.FD	Equity I Fund	8.077	37.03	299.08	0.00
04-05-99	E2.FD	Equity II Fund	1.050	29.08	30.53	0.00
04-05-99	EQ.FD	Equity Q Fund	6.501	41.61	270.51	0.00
04-29-99	TFMM.FD	Tax-Free Money Market Fund	268.220	1.00	268.22	0.00
05-04-99	LVTF.FD	Tax Exempt Bond Fund	37.020	21.28	787.78	0.00
05-27-99	TFMM.FD	Tax-Free Money Market Fund	235.480	1.00	235.48	0.00
06-02-99	LVTF.FD	Tax Exempt Bond Fund	36.694	21.06	772.78	0.00
06-29-99	TFMM.FD	Tax-Free Money Market Fund	197.140	1.00	197.14	0.00
07-02-99	F1.FD	Fixed Income I Fund	341.749	20.81	7,111.79	0.00
07-02-99	F3.FD	Fixed III Fund	324.809	9.90	3,215.61	0.00
07-02-99	LVTF.FD	Tax Exempt Bond Fund	39.914	20.83	831.41	0.00
07-02-99	RESF.FD	Real Estate Securities Fund	82.741	25.34	2,096.66	0.00
07-02-99	E1.FD	Equity I Fund	8.371	39.48	330.49	0.00
07-02-99	E2.FD	Equity II Fund	0.591	33.15	19.59	0.00
07-02-99	EQ.FD	Equity Q Fund	8.441	44.93	379.27	0.00
07-29-99	TFMM.FD	Tax-Free Money Market Fund	64.430	1.00	64.43	0.00
08-03-99	LVTF.FD	Tax Exempt Bond Fund	44.632	20.83	929.68	0.00
08-30-99	TFMM.FD	Tax-Free Money Market Fund	86.210	1.00	86.21	0.00
09-02-99	LVTF.FD	Tax Exempt Bond Fund	51.319	20.69	1,061.79	0.00
09-29-99	TFMM.FD	Tax-Free Money Market Fund	48.220	1.00	48.22	0.00
10-04-99	F1.FD	Fixed Income I Fund	318.174	20.59	6,551.20	0.00
10-04-99	F3.FD	Fixed III Fund	355.126	9.75	3,462.48	0.00
10-04-99	LVTF.FD	Tax Exempt Bond Fund	44.089	20.68	911.76	0.00
10-04-99	RESF.FD	Real Estate Securities Fund	95.099	22.89	2,176.82	0.00
10-04-99	E1.FD	Equity I Fund	9.004	36.53	328.92	0.00
10-04-99	E2.FD	Equity II Fund	0.780	31.45	24.53	0.00
10-04-99	EQ.FD	Equity Q Fund	8.010	42.07	336.99	0.00
10-28-99	TFMM.FD	Tax-Free Money Market Fund	6.110	1.00	6.11	0.00
11-02-99	LVTF.FD	Tax Exempt Bond Fund	53.198	20.55	1,093.22	0.00
11-29-99	TFMM.FD	Tax-Free Money Market Fund	0.370	1.00	0.37	0.00
12-02-99	LVTF.FD	Tax Exempt Bond Fund	51.385	20.59	1,058.01	0.00
12-17-99	F1.FD	Fixed Income I Fund	351.830	20.31	7,145.67	0.00
12-17-99	F3.FD	Fixed III Fund	376.187	9.61	3,615.16	0.00

Ronald Blue & Co., LLC
TRANSACTION REPORT
STEVE & TERRY LARGENT
56175011
From 01-01-99 To 12-31-99

Trade Date	Asset ID	Security	Shares	Price	Total Cash Flow	Invested Capital
12-17-99	LVTF.FD	Tax Exempt Bond Fund	65.655	20.44	1,341.99	0.00
12-17-99	IN.FD	International Fund	46.669	44.19	2,062.32	0.00
12-17-99	RESF.FD	Real Estate Securities Fund	210.724	21.72	4,576.93	0.00
12-17-99	E1.FD	Equity I Fund	14.563	35.92	523.09	0.00
12-17-99	E2.FD	Equity II Fund	1.031	33.27	34.30	0.00
12-17-99	EQ.FD	Equity Q Fund	10.731	39.97	428.92	0.00
12-17-99	ET.FD	Tax-Managed Large Cap Fd	122.377	20.65	2,527.09	0.00
12-31-99	TFMM.FD	Tax-Free Money Market Fund	11.210	1.00	11.21	0.00
					74,097.79	0.00
Short Term Gain Reinvestment						
02-19-99	IN.FD	International Fund	13.407	36.54	489.88	0.00
02-19-99	E1.FD	Equity I Fund	7.936	35.12	278.72	0.00
02-19-99	EQ.FD	Equity Q Fund	22.757	39.50	898.91	0.00
12-17-99	IN.FD	International Fund	4.511	44.19	199.35	0.00
12-17-99	E1.FD	Equity I Fund	142.445	35.92	5,116.63	0.00
12-17-99	E2.FD	Equity II Fund	35.345	33.28	1,176.28	0.00
12-17-99	EQ.FD	Equity Q Fund	120.122	39.97	4,801.27	0.00
					12,961.04	0.00
Long Term Gain Reinvestment						
02-19-99	F1.FD	Fixed Income I Fund	19.759	21.63	427.38	0.00
02-19-99	IN.FD	International Fund	20.878	36.54	762.87	0.00
02-19-99	E1.FD	Equity I Fund	29.879	35.12	1,049.36	0.00
02-19-99	E2.FD	Equity II Fund	10.534	28.45	299.70	0.00
02-19-99	EQ.FD	Equity Q Fund	73.274	39.50	2,894.34	0.00
12-17-99	IN.FD	International Fund	196.206	44.19	8,670.33	0.00
12-17-99	E1.FD	Equity I Fund	373.949	35.92	13,432.24	0.00
12-17-99	E2.FD	Equity II Fund	26.181	33.28	871.32	0.00
12-17-99	EQ.FD	Equity Q Fund	373.117	39.97	14,913.50	0.00
					43,321.04	0.00
					-91,384.83	-201,267.70

Ronald Blue & Co., LLC
TRANSACTION REPORT
LARGENT CHILDREN'S TRUST
56097011
From 01-01-99 To 12-31-99

Trade Date	Asset ID	Security	Shares	Price	Total Cash Flow	Invested Capital
Redemptions						
03-01-99	TFMM.FD	Tax-Free Money Market Fund	1,500.000	1.00	-1,500.00	-1,500.00
03-10-99	F1.FD	Fixed I Fund	966.636	21.58	-20,860.00	-20,860.00
03-10-99	IN.FD	International Fund	114.975	37.53	-4,315.00	-4,315.00
03-10-99	RESF.FD	Real Estate Securities Fund	101.126	23.98	-2,425.00	-2,425.00
03-10-99	EQ.FD	Equity Q Fund	9.811	40.77	-400.00	-400.00
					-29,500.00	-29,500.00
						↳ to Vanguard MM
Exchange Purchases						
03-12-99	F2.FD	Short Term Bond Fund	2,079.337	18.38	38,218.22	38,218.22
03-12-99	MM	Money Market Fund	5,640.660	1.00	5,640.66	5,640.66
03-12-99	E1.FD	Equity I Fund	75.271	36.36	2,736.85	2,736.85
					46,595.73	46,595.73
Exchange Redemptions						
03-12-99	F3.FD	Fixed III Fund	943.154	10.22	-9,639.03	-9,639.03
03-12-99	LVTF.FD	Tax Exempt Bond Fund	1,116.129	21.34	-23,818.19	-23,818.19
03-12-99	TFMM.FD	Tax-Free Money Market Fund	889.100	1.00	-889.10	-889.10
03-12-99	E2.FD	Equity II Fund	70.638	28.92	-2,042.85	-2,042.85
03-12-99	EQ.FD	Equity Q Fund	248.903	41.00	-10,205.00	-10,205.00
					-46,594.17	-46,594.17
Management Fee						
01-04-99	TFMM.FD	Tax-Free Money Market Fund	338.000	1.00	-338.00	0.00
04-05-99	MM	Money Market Fund	340.000	1.00	-340.00	0.00
07-01-99	MM	Money Market Fund	221.000	1.00	-221.00	0.00
10-08-99	MM	Money Market Fund	290.000	1.00	-290.00	0.00
					-1,189.00	0.00
Shareholder Servicing Fee						
01-04-99	TFMM.FD	Tax-Free Money Market Fund	50.000	1.00	-50.00	0.00
04-05-99	MM	Money Market Fund	52.000	1.00	-52.00	0.00
07-01-99	MM	Money Market Fund	26.000	1.00	-26.00	0.00
10-08-99	MM	Money Market Fund	38.000	1.00	-38.00	0.00
					-166.00	0.00
Income - Dividend Exchange						
03-12-99	TFMM.FD	Tax-Free Money Market Fund	1.560	1.00	1.56	0.00
					1.56	0.00
Income - Dividend Reinvestment						
01-28-99	TFMM.FD	Tax-Free Money Market Fund	5.400	1.00	5.40	0.00
02-02-99	LVTF.FD	Tax Exempt Bond Fund	3.554	21.50	76.41	0.00

Ronald Blue & Co., LLC
TRANSACTION REPORT
LARGENT CHILDREN'S TRUST
56097011
From 01-01-99 To 12-31-99

Trade Date	Asset ID	Security	Shares	Price	Total Cash Flow	Invested Capital
02-19-99	IN.FD	International Fund	0.178	36.57	6.51	0.00
02-19-99	RESF.FD	Real Estate Securities Fund	3.926	23.80	93.44	0.00
02-19-99	E2.FD	Equity II Fund	0.025	28.00	0.70	0.00
02-19-99	EQ.FD	Equity Q Fund	0.023	39.57	0.91	0.00
02-25-99	TFMM.FD	Tax-Free Money Market Fund	4.800	1.00	4.80	0.00
03-02-99	LVTF.FD	Tax Exempt Bond Fund	3.523	21.35	75.21	0.00
03-30-99	MM	Money Market Fund	12.160	1.00	12.16	0.00
04-05-99	F1.FD	Fixed I Fund	27.470	21.39	587.58	0.00
04-05-99	F2.FD	Short Term Bond Fund	19.405	18.28	354.73	0.00
04-05-99	RESF.FD	Real Estate Securities Fund	7.616	23.29	177.37	0.00
04-05-99	E1.FD	Equity I Fund	0.683	37.01	25.28	0.00
04-05-99	EQ.FD	Equity Q Fund	0.680	41.60	28.29	0.00
04-29-99	MM	Money Market Fund	21.330	1.00	21.33	0.00
05-27-99	MM	Money Market Fund	19.560	1.00	19.56	0.00
06-29-99	MM	Money Market Fund	23.400	1.00	23.40	0.00
07-02-99	F1.FD	Fixed I Fund	28.164	20.81	586.09	0.00
07-02-99	F2.FD	Short Term Bond Fund	24.559	18.10	444.51	0.00
07-02-99	RESF.FD	Real Estate Securities Fund	7.031	25.34	178.16	0.00
07-02-99	E1.FD	Equity I Fund	0.708	39.46	27.94	0.00
07-02-99	EQ.FD	Equity Q Fund	0.883	44.93	39.67	0.00
07-29-99	MM	Money Market Fund	21.020	1.00	21.02	0.00
08-30-99	MM	Money Market Fund	23.050	1.00	23.05	0.00
09-29-99	MM	Money Market Fund	22.300	1.00	22.30	0.00
10-04-99	F1.FD	Fixed I Fund	29.155	20.59	600.31	0.00
10-04-99	F2.FD	Short Term Bond Fund	29.135	18.03	525.30	0.00
10-04-99	RESF.FD	Real Estate Securities Fund	8.081	22.89	184.97	0.00
10-04-99	E1.FD	Equity I Fund	0.761	36.53	27.80	0.00
10-04-99	EQ.FD	Equity Q Fund	0.838	42.05	35.24	0.00
10-28-99	MM	Money Market Fund	21.090	1.00	21.09	0.00
11-29-99	MM	Money Market Fund	23.260	1.00	23.26	0.00
12-17-99	F1.FD	Fixed I Fund	32.969	20.31	669.60	0.00
12-17-99	F2.FD	Short Term Bond Fund	20.903	18.02	376.68	0.00
12-17-99	IN.FD	International Fund	3.336	44.19	147.41	0.00
12-17-99	RESF.FD	Real Estate Securities Fund	17.906	21.72	388.92	0.00
12-17-99	E1.FD	Equity I Fund	1.264	35.93	45.42	0.00
12-17-99	EQ.FD	Equity Q Fund	1.266	39.96	50.59	0.00
12-31-99	MM	Money Market Fund	24.180	1.00	24.18	0.00
					5,976.59	0.00
Short Term Gain Reinvestment						
02-19-99	IN.FD	International Fund	1.165	36.54	42.57	0.00
02-19-99	E1.FD	Equity I Fund	0.557	35.10	19.55	0.00
02-19-99	EQ.FD	Equity Q Fund	3.888	39.50	153.59	0.00
12-17-99	IN.FD	International Fund	0.322	44.25	14.25	0.00
12-17-99	E1.FD	Equity I Fund	12.370	35.92	444.32	0.00
12-17-99	EQ.FD	Equity Q Fund	14.169	39.97	566.34	0.00
					1,240.62	0.00

Ronald Blue & Co., LLC
TRANSACTION REPORT
LARGENT CHILDREN'S TRUST
56097011
From 01-01-99 To 12-31-99

Trade Date	Asset ID	Security	Shares	Price	Total Cash Flow	Invested Capital
Long Term Gain Reinvestment						
02-19-99	F1.FD	Fixed I Fund	2.450	21.63	52.99	0.00
02-19-99	IN.FD	International Fund	1.814	36.54	66.29	0.00
02-19-99	E1.FD	Equity I Fund	2.096	35.12	73.62	0.00
02-19-99	E2.FD	Equity II Fund	0.604	28.46	17.19	0.00
02-19-99	EQ.FD	Equity Q Fund	12.520	39.50	494.54	0.00
12-17-99	IN.FD	International Fund	14.024	44.19	619.74	0.00
12-17-99	E1.FD	Equity I Fund	32.473	35.92	1,166.44	0.00
12-17-99	EQ.FD	Equity Q Fund	44.012	39.97	1,759.14	0.00
					4,249.95	**0.00**
					-19,384.72	**-29,498.44**

THE Vanguard GROUP.

Vanguard Tax-Exempt Money Market Fund

JAMES A ZORN TR TR
UA 11-07-89
LARGENT CHILDRENS TRUST

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 45
Account number: 9902413893
Statement number: 07635153

Third Party Copy

			ACCOUNT VALUE		On 12/31/1998	On 12/31/1999
					$ 2,159.54	$ 9,125.14
Trade date	Transaction		Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998			$ 1.00		2,159.540
1/11	Checkwriting 1021		$ -340.00	1.00	-340.000	1,819.540
1/19	Checkwriting 1023		-240.80	1.00	-240.800	1,578.740
1/25	Check purchase	CNL	309.38	1.00	309.380	1,888.120
1/29	Checkwriting 1024		-500.00	1.00	-500.000	1,388.120
1/31	Income dividend		4.64	1.00	4.640	1,392.760
2/08	Checkwriting 1025		-340.00	1.00	-340.000	1,052.760
2/19	Checkwriting 1026		-976.80	1.00	-976.800	75.960
2/28	Income dividend		1.52	1.00	1.520	77.480
3/11	Wire purchase	From Russell account	1,500.00	1.00	1,500.000	1,577.480
3/11	Wire purchase		28,000.00	1.00	28,000.000	29,577.480
3/04	Checkwriting 1027		-340.00	1.00	-340.000	29,237.480
3/31	Income dividend		48.82	1.00	48.820	29,286.300
4/01	Checkwriting 1028		-4,067.50	1.00	-4,067.500	25,218.800
4/15	Checkwriting 1029		-680.00	1.00	-680.000	24,538.800
4/20	Check purchase	CNL	309.38	1.00	309.380	24,848.180
4/30	Checkwriting 1030		-575.00	1.00	-575.000	24,273.180
4/30	Income dividend		61.47	1.00	61.470	24,334.650
5/17	Checkwriting 1031		-8,647.50	1.00	-8,647.500	15,687.150
5/31	Income dividend		55.76	1.00	55.760	15,742.910
6/30	Income dividend		40.34	1.00	40.340	15,783.250
7/20	Check purchase	CNL	309.38	1.00	309.380	16,092.630
7/31	Income dividend		39.81	1.00	39.810	16,132.440
8/05	Checkwriting 1032		-460.05	1.00	-460.050	15,672.390
8/19	Checkwriting 1033		-258.35	1.00	-258.350	15,414.040
8/20	Checkwriting 1035		-340.00	1.00	-340.000	15,074.040
8/25	Checkwriting 1036		-229.00	1.00	-229.000	14,845.040
8/26	Checkwriting 1037		-205.00	1.00	-205.000	14,640.040
8/30	Checkwriting 1034		-341.00	1.00	-341.000	14,299.040
8/31	Income dividend		39.33	1.00	39.330	14,338.370
9/13	Checkwriting 1038		-3,060.00	1.00	-3,060.000	11,278.370
9/21	Checkwriting 1039		-2,571.80	1.00	-2,571.800	8,706.570
9/30	Income dividend		30.83	1.00	30.830	8,737.400
10/21	Check purchase	CNL	309.38	1.00	309.380	9,046.780
10/31	Income dividend		24.31	1.00	24.310	9,071.090
11/30	Income dividend		25.72	1.00	25.720	9,096.810
12/31	Income dividend		28.33	1.00	28.330	9,125.140
	Balance on 12/31/1999			**$ 1.00**		**9,125.140**

THE Vanguard GROUP.

Vanguard Prime Money Market Fund

STEVE M LARGENT CUST
KRAMER LARGENT
OK UNIF TRANS MIN ACT

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 30
Account number: 9880651434
Statement number: 04030388

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 61.61	$ 1,498.29

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 1.00		61.610
1/31	Income dividend	$ 0.26	1.00	.260	61.870
2/28	Income dividend	0.23	1.00	.230	62.100
3/30	Exchange from Wellington	2,000.00	1.00	2,000.000	2,062.100
3/31	Income dividend	0.50	1.00	.500	2,062.600
4/16	Checkwriting 1009	-4.00	1.00	-4.000	2,058.600
4/20	Checkwriting 1011	-200.00	1.00	-200.000	1,858.600
4/21	Checkwriting 1008	-61.00	1.00	-61.000	1,797.600
4/30	Income dividend	7.51	1.00	7.510	1,805.110
5/04	Checkwriting 1010	-50.00	1.00	-50.000	1,755.110
5/31	Income dividend	6.92	1.00	6.920	1,762.030
6/30	Income dividend	6.71	1.00	6.710	1,768.740
7/31	Income dividend	7.15	1.00	7.150	1,775.890
8/31	Income dividend	7.34	1.00	7.340	1,783.230
9/30	Income dividend	7.33	1.00	7.330	1,790.560
10/31	Income dividend	7.85	1.00	7.850	1,798.410
11/30	Income dividend	7.83	1.00	7.830	1,806.240
12/03	Checkwriting 1012	-315.00	1.00	-315.000	1,491.240
12/31	Income dividend	7.05	1.00	7.050	1,498.290
	Balance on 12/31/1999		$ 1.00		1,498.290

Income dividends	$ 66.68
Purchases year-to-date	$ 2,000.00
Redemptions year-to-date	630.00

	Annualized yield	Compound annual yield	Distribution payable date
October	5.15%	5.27%	11/01/1999
November	5.30	5.43	12/01/1999
December	5.49	5.63	1/03/2000

THE Vanguard GROUP.

Vanguard Wellington Fund

STEVE M LARGENT CUST
KRAMER LARGENT
OK UNIF TRANS MIN ACT

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 21
Account number: 9880651434
Statement number: 04030388

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 33,178.56	$ 32,566.61

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 29.35		1,130.445
3/26	Income dividend .25	$ 282.61	29.17	9.688	1,140.133
3/30	Exchange to Prime MM	-2,000.00	29.30	-68.259	1,071.874
6/25	Income dividend .25	267.97	30.30	8.844	1,080.718
9/24	Income dividend .25	270.18	29.09	9.288	1,090.006
12/17	Income dividend .39	425.10	27.56	15.425	1,105.431
12/17	ST cap gain .19	207.10	27.56	7.515	1,112.946
12/17	LT cap gain 1.31	1,427.91	27.56	51.811	1,164.757
	Balance on 12/31/1999		$ 27.96		1,164.757

Income dividends	$ 1,245.86
Short-term gains	207.10
Long-term gains	1,427.91
Total income year-to-date	$ 2,880.87
Redemptions year-to-date	$ 2,000.00

The current Fund distribution was payable on December 20, 1999.

3/13/00 John 3rd r
$ 15K into G&I

THE Vanguard GROUP

Vanguard Prime Money Market Fund

STEVE M LARGENT CUST
KELLY LARGENT
OK UNIF TRANS MIN ACT

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 30
Account number: 9880651120
Statement number: 04030354

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 315.41	$ 841.96

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 1.00		315.410
1/31	Income dividend	$ 1.31	1.00	1.310	316.720
2/28	Income dividend	1.15	1.00	1.150	317.870
3/31	Income dividend	1.26	1.00	1.260	319.130
4/05	Exchange from Wellington	1,000.00	1.00	1,000.000	1,319.130
4/16	Checkwriting 1010	-5.00	1.00	-5.000	1,314.130
4/19	Checkwriting 1011	-56.00	1.00	-56.000	1,258.130
4/21	Checkwriting 1009	-74.00	1.00	-74.000	1,184.130
4/30	Checkwriting 1012	-375.00	1.00	-375.000	809.130
4/30	Income dividend	4.16	1.00	4.160	813.290
5/31	Income dividend	3.20	1.00	3.200	816.490
6/30	Income dividend	3.11	1.00	3.110	819.600
7/31	Income dividend	3.31	1.00	3.310	822.910
8/23	Exchange from Wellington	4,000.00	1.00	4,000.000	4,822.910
8/26	Checkwriting 1013	-4,000.00	1.00	-4,000.000	822.910
8/31	Income dividend	4.47	1.00	4.470	827.380
9/30	Income dividend	3.40	1.00	3.400	830.780
10/31	Income dividend	3.64	1.00	3.640	834.420
11/30	Income dividend	3.63	1.00	3.630	838.050
12/31	Income dividend	3.91	1.00	3.910	841.960
	Balance on 12/31/1999		$ 1.00		841.960

Income dividends	$ 36.55
Purchases year-to-date	$ 5,000.00
Redemptions year-to-date	4,510.00

	Annualized yield	Compound annual yield	Distribution payable date
October	5.15%	5.27%	11/01/1999
November	5.30	5.43	12/01/1999
December	5.49	5.63	1/03/2000

THE Vanguard GROUP.

December 31, 1999, year-to-date

Vanguard Wellington Fund

STEVE M LARGENT CUST
KELLY LARGENT
OK UNIF TRANS MIN ACT

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427

Fund number: 21
Account number: 9880651120
Statement number: 04030354

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 30,778.67	$ 27,214.19

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 29.35		1,048.677
3/26	Income dividend .25	$ 262.17	29.17	8.988	1,057.665
4/05	Exchange to Prime MM	-1,000.00	29.43	-33.979	1,023.686
6/25	Income dividend .25	255.92	30.30	8.446	1,032.132
8/23	Exchange to Prime MM	-4,000.00	31.00	-129.032	903.100
9/24	Income dividend .25	225.78	29.09	7.761	910.861
12/17	Income dividend .39	355.24	27.56	12.890	923.751
12/17	ST cap gain .19	173.06	27.56	6.279	930.030
12/17	LT cap gain 1.31	1,193.23	27.56	43.296	973.326
	Balance on 12/31/1999		$ 27.96		973.326

Income dividends	$ 1,099.11
Short-term gains	173.06
Long-term gains	1,193.23
Total income year-to-date	$ 2,465.40
Redemptions year-to-date	$ 5,000.00

Total cost basis on 12/31/1999	$ 22,477.13
Average cost per share	23.09

The current Fund distribution was payable on December 20, 1999.

3/13/00 3:20 pm
John
exchanged
$ 12K into G&I

THE Vanguard GROUP.

Vanguard Prime Money Market Fund

STEVE M LARGENT CUST
CASIE LARGENT
OK UNIF TRANS MIN ACT

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 30
Account number: 9880651256
Statement number: 04030367

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 1,709.70	$ 1,044.99

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 1.00		1,709.700
1/31	Income dividend	$ 7.09	1.00	7.090	1,716.790
2/28	Income dividend	6.26	1.00	6.260	1,723.050
3/31	Income dividend	6.85	1.00	6.850	1,729.900
4/13	Exchange from Wellington	1,000.00	1.00	1,000.000	2,729.900
4/16	Checkwriting 1011	-7.00	1.00	-7.000	2,722.900
4/20	Checkwriting 1013	-1,350.00	1.00	-1,350.000	1,372.900
4/21	Checkwriting 1012	-30.00	1.00	-30.000	1,342.900
4/30	Income dividend	6.82	1.00	6.820	1,349.720
5/06	Checkwriting 1014	-325.00	1.00	-325.000	1,024.720
5/31	Income dividend	4.23	1.00	4.230	1,028.950
6/30	Income dividend	3.92	1.00	3.920	1,032.870
7/31	Income dividend	4.18	1.00	4.180	1,037.050
8/31	Income dividend	4.29	1.00	4.290	1,041.340
9/30	Income dividend	4.28	1.00	4.280	1,045.620
10/06	Exchange from Wellington	500.00	1.00	500.000	1,545.620
10/12	Checkwriting 1015	-500.00	1.00	-500.000	1,045.620
10/31	Income dividend	4.93	1.00	4.930	1,050.550
11/30	Income dividend	4.58	1.00	4.580	1,055.130
12/03	Checkwriting 1016	-15.00	1.00	-15.000	1,040.130
12/31	Income dividend	4.86	1.00	4.860	1,044.990
	Balance on 12/31/1999		$ 1.00		1,044.990

Income dividends	$ 62.29
Purchases year-to-date	$ 1,500.00
Redemptions year-to-date	2,227.00

	Annualized yield	Compound annual yield	Distribution payable date
October	5.15%	5.27%	11/01/1999
November	5.30	5.43	12/01/1999
December	5.49	5.63	1/03/2000

THE Vanguard GROUP.

Vanguard Wellington Fund

STEVE M LARGENT CUST
CASIE LARGENT
OK UNIF TRANS MIN ACT

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 21
Account number: 9880651256
Statement number: 04030367

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 8,710.20	$ 7,572.83

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 29.35		296.770
3/26	Income dividend .25	$ 74.19	29.17	2.543	299.313
4/13	Exchange to Prime MM	-1,000.00	30.07	-33.256	266.057
6/25	Income dividend .25	66.51	30.30	2.195	268.252
9/24	Income dividend .25	67.06	29.09	2.305	270.557
10/06	Exchange to Prime MM	-500.00	29.25	-17.094	253.463
12/17	Income dividend .39	98.85	27.56	3.587	257.050
12/17	ST cap gain .19	48.16	27.56	1.747	258.797
12/17	LT cap gain 1.31	332.04	27.56	12.048	270.845
	Balance on 12/31/1999		$ 27.96		270.845

Income dividends	$ 306.61
Short-term gains	48.16
Long-term gains	332.04
Total income year-to-date	$ 686.81
Redemptions year-to-date	$ 1,500.00

Total cost basis on 12/31/1999	$ 6,255.14
Average cost per share	23.09

The current Fund distribution was payable on December 20, 1999.

THE Vanguard GROUP.

Vanguard Growth and Income Fund

STEVE M LARGENT CUST
KYLE LARGENT MINOR
OK UNIFORM GIFT TO MINOR

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 93
Account number: 9858270724
Statement number: 00168808

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 0.00	$ 11,343.66

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 30.76		.000
10/28	Exchange from Wellington	$ 8,845.40	34.36	257.433	257.433
11/12	Check purchase	331.60	36.34	9.125	266.558
11/26	Check purchase	1,000.00	36.69	27.255	293.813
12/21	Income dividend .19	55.82	35.66	1.565	295.378
12/21	ST cap gain .285	83.74	35.66	2.348	297.726
12/21	LT cap gain .995	292.34	35.66	8.198	305.924
	Balance on 12/31/1999		$ 37.08		305.924

Income dividends	$ 55.82
Short-term gains	83.74
Long-term gains	292.34
Total income year-to-date	$ 431.90
Purchases year-to-date	$ 10,177.00

Total cost basis on 12/31/1999	$ 10,608.90
Average cost per share	34.68

The current Fund distribution was payable on January 3, 2000.

THE Vanguard GROUP

Vanguard Prime Money Market Fund

STEVE M LARGENT CUST
KYLE LARGENT MINOR
OK UNIFORM GIFT TO MINOR

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427

Fund number: 30
Account number: 9858270724
Statement number: 00168808

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 1,018.49	$ 5,917.99

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 1.00		1,018.490
1/11	Checkwriting 1035	$ -700.00	1.00	-700.000	318.490
1/28	Checkwriting 1036	-250.00	1.00	-250.000	68.490
1/31	Income dividend	2.13	1.00	2.130	70.620
2/09	Exchange from Wellington	250.00	1.00	250.000	320.620
2/05	Check purchase	8,500.00	1.00	8,500.000	8,820.620
2/08	Checkwriting 1037	-250.00	1.00	-250.000	8,570.620
2/28	Income dividend	25.59	1.00	25.590	8,596.210
3/31	Check purchase - from closing Mutual Shares account	17,686.27	1.00	17,686.270	26,282.480
3/31	Income dividend	34.20	1.00	34.200	26,316.680
4/16	Checkwriting 1039	-34.00	1.00	-34.000	26,282.680
4/19	Checkwriting 1040	-300.00	1.00	-300.000	25,982.680
4/21	Checkwriting 1038	-121.00	1.00	-121.000	25,861.680
4/30	Checkwriting 1001	-375.00	1.00	-375.000	25,486.680
4/30	Income dividend	99.70	1.00	99.700	25,586.380
5/07	Checkwriting 1002	-1,400.00	1.00	-1,400.000	24,186.380
5/07	Exchange to Wellington	-15,000.00	1.00	-15,000.000	9,186.380
5/31	Income dividend	50.49	1.00	50.490	9,236.870
6/24	Checkwriting 1041	-600.00	1.00	-600.000	8,636.870
6/30	Income dividend	34.63	1.00	34.630	8,671.500
7/16	Exchange from Wellington	16,000.00	1.00	16,000.000	24,671.500
7/28	Checkwriting 1043	-22,000.00	1.00	-22,000.000	2,671.500
7/31	Income dividend	55.04	1.00	55.040	2,726.540
8/31	Income dividend	11.27	1.00	11.270	2,737.810
9/10	Check purchase	3,060.00	1.00	3,060.000	5,797.810
9/30	Income dividend	19.69	1.00	19.690	5,817.500
10/07	Checkwriting 1044	-4,969.00	1.00	-4,969.000	848.500
10/19	Check purchase	5,000.00	1.00	5,000.000	5,848.500
10/31	Income dividend	16.47	1.00	16.470	5,864.970
11/30	Income dividend	25.55	1.00	25.550	5,890.520
12/31	Income dividend	27.47	1.00	27.470	5,917.990
	Balance on 12/31/1999		$ 1.00		5,917.990

Income dividends	$ 402.23
Purchases year-to-date	$ 50,496.27
Redemptions year-to-date	45,999.00

	Annualized yield	Compound annual yield	Distribution payable date
October	5.15%	5.27%	11/01/1999
November	5.30	5.43	12/01/1999
December	5.49	5.63	1/03/2000

THE Vanguard GROUP.

Vanguard Wellington Fund

STEVE M LARGENT CUST
KYLE LARGENT MINOR
OK UNIFORM GIFT TO MINOR

(800) 992-2911 - Investment Adviser Services
INV-ADVISER EXT-4427
Fund number: 21
Account number: 9858270724
Statement number: 00168808

Third Party Copy

ACCOUNT VALUE	On 12/31/1998	On 12/31/1999
	$ 9,767.91	$ 0.00

Trade date	Transaction	Dollar amount	Share price	Shares transacted	Total shares owned
	Balance on 12/31/1998		$ 29.35		332.808
2/09	Exchange to Prime MM	$ -250.00	28.83	-8.672	324.136
3/26	Income dividend .25	81.03	29.17	2.778	326.914
5/07	Exchange from Prime MM	15,000.00	31.78	471.995	798.909
6/25	Income dividend .25	199.73	30.30	6.592	805.501
7/16	Exchange to Prime MM	-16,000.00	31.59	-506.489	299.012
9/24	Income dividend .25	74.75	29.09	2.570	301.582
10/28	Exchange to Grow & Inc	-8,845.40	29.33	-301.582	.000
	Balance on 12/31/1999		$ 27.96		.000

Income dividends	$ 355.51
Purchases year-to-date	$ 15,000.00
Redemptions year-to-date	25,095.40

The current Fund distribution was payable on December 20, 1999.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	OG&E Energy Corp.	March 29	Tulsa, OK-Orlando, Fl Tulsa, OK	N	Y	N	N
	Seattle Seahawks	Aug 13-15	Tulsa, OK-Seattle, WA Tulsa, OK	Y	Y	Y	N
	National Broadcasting Company, Inc.	Sept 2-4	Tulsa, OK-New York Tulsa, OK	Y	Y	Y	N
	Jim DeMint For Congress	Sept 20	Tulsa, OK-Atlanta, GA South Carolina; DC	N	Y	N	N
	Fellowship of Christian Athletes	Nov 17	Washington, DC-Ruston, LA-Monroe, LA-DC	N	Y	N	N

This page may be copied if more space is required.

STEVE LARGENT 1999 TRAVEL REPORT

Date(s)	Itinerary	Payor	Description	Lodging	Meals	Airfare	F
3/13/1999	Tulsa/Cape Girardeau, MO/Tulsa	Cape Giarardeau County Rep. Party	Political Event	No	Yes	Private	
3/21/1999	Tulsa/Buffalo/Washington, D.C.	Jack Quinn for Congress	Campaign visit	Yes	Yes	Yes-Commercial & Private	
3/21/1999	Tulsa/Buffalo/Washington, D.C.	Tom Reynolds for Congress	Campaign visit	No	Yes	Yes-Commercial & Private	
4/5/1999	DCA/Chicago, IL	Family PAC	Dinner Reception	No	Yes	Yes-Commercial	
4/6/1999	Chicago, IL	Chicago Mercantile Exchange	Tour of Exchange	Yes	Yes	No	
4/6/1999	Chicago, IL/Monroe, NC	Robin Hayes for Congress	Campaign visit-Reception	No	Yes	No	
4/7/1999	Winston-Salem, NC	NC State Republican Party	Meeting/speech	Yes	Yes	No	
4/7/1999	Greensboro, NC	Cong. Walter Jones' State PAC	Lunch/speech	No	Yes	No	
4/8/1999	Pinehurst, NC/Tulsa, OK	Moore County Rep. Party	Lincoln Day Dinner	Yes	Yes	Yes-Commercial	
4/9/1999	Tulsa/Jackson, MS/Tulsa	Mississippi Family Council	Dinner/Speech	Yes	Yes	Yes-Private	
5/18/1999	Tulsa/Oakland, SF/Tulsa	Charles Ball for Congress	Campaign visit-Reception	No	Yes	Yes-Private	
8/16/1999	Tulsa/Augusta, GA/Tulsa	Charles Norwood for Congress	Campaign visit-BBQ	No	Yes	Yes-Private	
11/11/1999	Tulsa/Elko, NV	Elko 2nd Amendment Group	Political Event	No	Yes	Yes-Commercial & Private	
11/11/1999	Elkos, NV/Portland, OR	Oregon Family Council	Dinner/Speech	Yes	Yes	Commercial	

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 12 PM 4:04

(7)

HAND DELIVERED

MC

(Office Use Only)

JOHN B. LARSON
(Full Name)

1887 OLD MAIN STREET
(Mailing Address)

EAST HARTFORD, CT 06108

Daytime Telephone: WASHINGTON (202) 225-2265
HARTFORD (860) 278-8888

Filer Status	[X] Member of the U.S. House of Representatives	State CT District 1ST	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John B. Larson	5/10/00

2630

Name	JOHN B. LARSON	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
NETWORKING CONCEPTS, LLC	INSURANCE COMMISSIONS FOR PAST SERVICES	GROSS $86,900 NET $81,158
LARSON & LYSIK, INC.	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name JOHN B. LARSON

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X										X								P
	Examples: Simon & Schuster			Indefinite																Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X									X							
	FLEET BANK - SAVINGS			X												X						X										
	GALAXY FUNDS			X										X									X									
	FLEET BANK - IRA			X												X						X										
SP	FLEET BANK - IRA			X												X						X										
	FEDERAL EMPLOYEE CREDIT UNION			X										X								X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN B. LARSON

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P. S. E
	COMMON STOCK -																															
	LARSON & LYSIK, INC.						X								N	O	N	E					N	O	N	E						
JT	NETWORKING CONCEPTS, LLC						X								S	E	E		S	C H E D	U	L	E	I								
	MERRILL LYNCH SEP:																															
	PHOENIX ENGEMANN FUND			X										X			X						X									
	LORD ABBETT GROWTH FUND			X										X			X						X									
	IVY INT'L FUND			X										X			X						X									
	M.L. BASIC VALUE FUND			X										X			X						X									
	M.L. RETIREMENT FUND				X									X			X							X								

This page may be copied if more space is required.

SCHEDULE IV — TRANSACTIONS

Name JOHN B. LARSON

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	ARTHUR ANDERSEN SETTLEMENT FUND														
	COLONIAL PORTSMOUTH, L.P.		X		11/1/99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	Mar 19-21	Wash., D.C.-Hershey, PA-Hartford	Y	Y	N	N
	The Democratic Leadership Council	Apr 30-May 3	Wash., D.C.-New Orleans-Wash., D.C.	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
DIRECTOR	THE OLD STATE HOUSE
MEMBER	RIVER FRONT RECAPTURE
MEMBER	NETWORKING CONCEPTS, LLC

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 11 PM 5:35
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

Thomas P. Latham
(Full Name)

178 180th Street
(Mailing Address)

Alexander, Iowa 50420

Daytime Telephone (515)692-3599

Filer Status	[X] Member of the U.S. House of Representatives	State: Iowa District: 5th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas P. Latham	5/11/00

2637

Name Thomas P. Latham	Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Latham Seed Company, Alexander, Iowa	Salary	$5,100

For payments to charity in lieu of honoraria, use Schedule II.

Name Thomas P. Latham

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP	Mega Corp Stock	E: X	DIVIDENDS: X	VI: X	P
DC	Simon & Schuster	Indefinite	Other Type of Income: Royalties	IX: X	
JT	1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: X	
	Latham Seed Co. (1/3 interest) Common Stock, Seed Sales, Alexander, IA	H: X	Other Type of Income: S-Corp Income	VIII: X	
	Latham Kanawha Farm (80acres) Partnership interest (25%)	D: X	Other Type of Income: Ptrship Income	III: X	
	Latham Hospital Farm (360 acres) Partnership Interest (25%)	D: X	Other Type of Income: Ptrship Income	VI: X	
	Latham Wright Farm (562 acres) Partnership Interest ((20%)	F: X	Other Type of Income: Ptrship Income	VI: X	
	Farm Buildings Alexander, Iowa	C: X	RENT: X	III: X	
	GE Life & Annuity Company Annuity Contract	F: X	Not Applicable	Not Applicable	E

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas P. Latham

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	401(K) Pension Plan Fringe Benefits Design	D	Not Applicable	Not Applicable	
	Individual Retirement Acct Salomon Smith Barney	D	Not Applicable	Not Applicable	
	First Citizens Nat'l Bank Clarion, Iowa	D	INTEREST	III	
DC	First Citizens Nat'l Bank Clarion, Iowa	D	INTEREST	IV	
	Municipal Bonds - Salomon Smith Barney IA State Univ Science & Technology Univ. State Univ. Iowa Academic 0-coupon	D	INTEREST	IV	
	Municipal Money Mkt Fund Salomon Smith Barney	B	DIVIDENDS	II	
	Mutual Funds - Fidelity Advisors Serll Growth Opportunities Port CL1, Salomon Smith Barney	F	DIVIDENDS; CAPITAL GAINS	VI	
	Green Circle Inv. Inc. (1/6 common stock) Bank Holding Company for Peoples Trust & Savings Bank	G	DIVIDENDS	I	
	Congressional Federal Credit Union Washington, D.C.	C	INTEREST	II	

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SCHEDULE IV — TRANSACTIONS

Name Thomas P. Latham

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Excahnged Nationwide Life Insurance Co. annuity for GE Life & Annuity Company annuity			X	9-21-99			X							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Peoples Trust & Savings , Iowa	Unsecured		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
Not Applicable		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Chicago Mercantiles Exchange/ Chicago Board of Trade	Mar. 18-20	Wash., D.C. - Boca Raton, F - Wash., D.C.	Y	Y	N	N

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Consultant	Latham Seed Company
General Partner	Latham Kanawha Farm
General Partner	Latham Hospital Farm
General Partner	Latham Wright Farm

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	Not Applicable	

GPO 2000 62-753 (max)

Use additional sheets if more space is required

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 12 PM 3:50
OFFICE OF THE CLERK

Thomas P. Latham
(Full Name)

178 180th Street
(Mailing Address)

Alexander, Iowa 50420

Daytime Telephone (515)692-3599

MC

HAND DELIVERED

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State Iowa District 5th	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Thomas P. Latham	5/11/00

2645

Name Thomas P. Latham	Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Latham Seed Company, Alexander, Iowa	Salary	$5,100

For payments to charity in lieu of honoraria, use Schedule II.

Name Thomas P. Latham

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A: Asset and/or Income Source	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	Mega Corp. Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	Latham Seed Co. (1/3 interest) Common Stock, Seed Sales, Alexander, IA								X											S-Corp Income								X				
	Latham Kanawha Farm (80acres) Partnership interest (25%)				X															Ptrship Income			X									
	Latham Hospital Farm (360 acres) Partnership Interest (25%)				X															Ptrship Income						X						
	Latham Wright Farm (562 acres) Partnership Interest ((20%)						X													Ptrship Income						X						
	Farm Buildings Alexander, Iowa			X											X								X									
	GE Life & Annuity Company Annuity Contract						X							Not Applicable							Not Applicable											E

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Thomas P. Latham

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	401(K) Pension Plan Fringe Benefits Design	D	Not Applicable	Not Applicable	
	Individual Retirement Acct Salomon Smith Barney	D	Not Applicable	Not Applicable	
	First Citizens Nat'l Bank Clarion, Iowa	D	INTEREST	III	
DC	First Citizens Nat'l Bank Clarion, Iowa	D	INTEREST	IV	
	Municipal Bonds - Salomon Smith Barney IA State Univ Science & Technology Univ. State Univ. Iowa Academic-0-coupon	D	INTEREST	IV	
	Municipal Money Mkt Fund Salomon Smith Barney	B	DIVIDENDS	II	
	Mutual Funds, Fidelity Advisors Serii Growth Opportunities Port. CLI, Salomon Smith Barney	F	DIVIDENDS; CAPITAL GAINS	VI	
	Green Circle Inv. Inc. (1/6 common stock)				
	Bank Holding Company for Peoples Trust & Savings Bank	G	DIVIDENDS	I	
	Congressional Federal Credit Union Washington, D.C.	C	INTEREST	II	

This page may be copied if more space is required.

Name Thomas P. Latham

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Excahnged Nationwide Life Insurance Co. annuity for GE Life & Annuity Company annuity			X	9-21-99			X							

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Peoples Trust & Savings , Iowa	Unsecured		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
Not Applicable		

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Chicago Mercantiles Exchange/ Chicago Board of Trade	Mar. 18-20	Wash., D.C. - Boca Raton, FL - Wash., D.C.	Y	Y	N	N

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Consultant	Latham Seed Company
General Partner	Latham Kanawha Farm
General Partner	Latham Hospital Farm
General Partner	Latham Wright Farm

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	Not Applicable	

Use additional sheets if more space is required

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 16 AM 10:48
HAND DELIVERED
(Office Use Only)
MC

STEVEN C. LATOURETTE
(Full Name)

1224 LONGWORTH BLDG.
WASHINGTON D.C.
(Mailing Address)

202-225-5731
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State OH District 19	☐ Officer or Employee — Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☑
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☑
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	S. C. Latourette	5-15-00

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Name	S. LaFourette	Page 2 of 3

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	MADISON LOCAL SCHOOLS	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name S. LoTourette | Page 3 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

BLOCK A			BLOCK B												BLOCK C							BLOCK D											BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP					X								X										X									P
		Mega Corp Stock																																
		Simon & Schuster			Indefinite																Royalties									X				
		1st Bank of Paducah, KY accounts						X									X									X								
	Thrift Savings					X											X								X									

For additional assets and unearned income, use next page.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 MAY 17 PM 1:45
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 15 2000
(Office Use Only)

Rick A. Lazio
(Full Name)

126 W. Main Street
(Mailing Address)

Babylon New York 11702
Daytime Telephone 631-893-9010

Filer Status	[X] Member of the U.S. House of Representatives — State NY District 02	[ ] Officer or Employee — Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rick A. Lazio	05/15/2000

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Name RICK A. LAZIO | Page 2 of 8

SCHEDULE I — EARNED INCOME

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	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	SOUTHSIDE HOSPITAL	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

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at close of reporting year.
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BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A	Block B: None	A: $1 – $1,000	B: $1,001 – $15,000	C: $15,001 – $50,000	D: $50,001 – $100,000	E: $100,001 – $250,000	F: $250,001 – $500,000	G: $500,001 – $1,000,000	H: $1,000,001 – $5,000,000	I: $5,000,001 – $25,000,000	J: $25,000,001 – $50,000,000	K: Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: None	I: $1 – $200	II: $201 – $1,000	III: $1,001 – $2,500	IV: $2,501 – $5,000	V: $5,001 – $15,000	VI: $15,001 – $50,000	VII: $50,001 – $100,000	VIII: $100,001 – $1,000,000	IX: $1,000,001 – $5,000,000	X: Over $5,000,000	XI	Block E: P, S, E
SP, DC, JT — Examples: SP Mega Corp. Stock					X								X																			P
DC Simon & Schuster			Indefinite																Royalties					X				X				
JT 1st Bank of Paducah, KY accounts							X								X										X							
WALT DISNEY CO				X									X								X											P
GOLDMAN SACHS					X								X								X											P
KEYCORP				X									X								X											
MERCK + CO				X									X								X											P
NORTH FORK BANCORP				X									X									X										
CALLS COMPUTER ASSOC	X																					X										S

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name RICK A. LAZIO

Page 4 of 8

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	X $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	CALLS MONSANTO CO	X															X						X									S
	CALLS MONSANTO CO	X															X						X									S
	SCHLUMBERGER	X												X			X									X						S
	CALLS SCHLUMBERGER	X															X						X									S
	DREYFUS MONEY MKT				X									X									X									S
	CALLS SCHLUMBERGER	X															X						X									S
	ARROW ELECTRONICS				X																X											P
	BOEING CO				X									X									X									
	CALLS SCHLUMBERGER	X															X						X									S
	COMPAQ COMPUTER	X												X			X								X							S
	ARROW ELECTRONICS			X																	X											P
	69 HOLLYWALK, FIRE. HUDSON NY						X								X											X						
	CONGRESSIONAL FED CU			X												X						X										
	BANK OF NEW YORK			X												X						X										

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SCHEDULE IV — TRANSACTIONS

Name RICK A. LAZIO

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
	COMPUTER ASSOC INTL STOCK		X		1-15-99		X								
	TOWER REALTY TRUST STOCK		X		5-4-99	X									
	U.S. FILTER CORP. NEW STOCK		X		4-28-99	X									
	COMPAQ COMPUTER STOCK	X			3-9-99	X									
	COMPAQ COMPUTER STOCK		X		12-21-99	X									
	MONSANTO CORP STOCK	X			1-21-99	X									
	MONSANTO CORP STOCK		X		12-17-99	X									
	SCHLUMBERGER LTD. STOCK		X		8-10-99	X									
	SCHLUMBERGER LTD. STOCK		X		9-17-99	X									
	COMPUTER ASSOC INTL STOCK		X		1-15-99	X									
	WALT DISNEY CO STOCK	X			3-31-99	X									
	GOLDMAN SACHS STOCK	X			5-4-99		X								
	MERCK + CO. STOCK	X			5-25-99	X									
	ARROW ELECTRONICS STOCK	X			3-9-99	X									
	ARROW ELECTRONICS STOCK	X			9-24-99	X									
	ARROW ELECTRONICS STOCK	X			10-4-99	X									

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SCHEDULE IV — TRANSACTIONS

Name RICK A. LAZIO | Page 6 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out		Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset	PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
	GOLDMAN SACHS STOCK	X			8-10-99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	Developers Tax Credit Conference	Jan 8-9	NY - Orlando, Fl - NY	Y	N	N	N
	Stand up for Rural America	Feb 22	Long Island - Albany - Long Island	N	N	N	N
	Aspen Institute	Mar 19-21	NY - Hershey, PA - NY	Y	Y	Y	N
	ABC News	May 22-23	Long Island - NYC - Long Island	Y	N	Y	N
	Consulting Engineers Council of NY	June 4-6	Long Island - Poughkeepsie - Long Island	Y	Y	Y	N
	NYS Order Sons of Italy	June 12-13	Long Island - Elmsville - Long Island	Y	Y	Y	N
	New York State Broadcasters Assoc	June 27-28	Long Island - Lake George - L. Island	Y	Y	Y	N
	Invest to Compete alliance	July 2-5	Long Island - Cape Cod, MA - Long Island	Y	Y	Y	N
	Mortgage Bankers Association	Nov 10-12	DC - Charlottesville, VA - NY	Y	N	Y	N

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Name	RICK ALAZIO	Page 8 of 8

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1-93	SUFFOLK COUNTY RETIREMENT PLAN	VESTED RETIREMENT PLAN
	- NYS EMPLOYEE RETIREMENT SYSTEM	

GPO 1999 SS-195 (mec)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
00 MAY 15 PM 4:49

HAND DELIVERED (16)
(Office Use Only)

JAMES A. LEACH
(Full Name)

2186 Rayburn House Office Building
(Mailing Address)
Washington DC 20515

Daytime Telephone:
(202) 225-6576

Filer Status	[X] Member of the U.S. House of Representatives	State: IA District: 01	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule I**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION. Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and wilfully falsifies, or who knowingly and wilfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James A. Leach	5/15/00

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Name JAMES A. LEACH | Page 2 of 16

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NA		

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	NA			

Name JAMES A. LEACH

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan over which you have investment power, provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	*Examples:* Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	Adel Wholesalers, Incorporated	X													X														X			S, E
	Leach Family Farms, Inc.							X							X												X					
	Mehta Tech, Inc.							X								X											X					
	Foxley Cattle Company									X					X													X				
	Merrill Lynch CMA								X							X											X					S
	Mehta Tech Holdings, Inc.							X							X														X			E

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	The following investments are held in the Lois Hill Leach Trust:																													
	CMA Treasury Fund				X										X							X								S
	Michigan Mun. Bd. Auth. Dev.					X									X									X						
	Airtouch Communications	X											X										X							S
	AT&T Corp.				X								X									X								
	Amn Water Works			X									X									X								
	Ameritech Corp.	X											X									X								E
	Bell Atlantic Corp.				X								X									X								
	BellSouth Corp.				X								X									X								
	Boeing Company				X								X									X								
	Bristol Myers Squibb Co.				X								X									X								
	Domtar, Inc.			X									X								X									
	Ericsn LM Tel.						X						X									X								
	FPL Group, Inc.			X									X									X								
	GATX Corp.				X								X									X								
	General Electric					X							X									X								
	IMC Global Inc. Dev PV			X									X								X									
	Intl Flavors & Fragrances			X									X									X								
	Kansas City Power & Light			X									X									X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Lucent Technologies				X									X								X										
	Lee Enterprises, Inc.			X										X									X									
	Lee Enterprises, Inc. CLB			X										X									X									
	Media One Group, Inc.				X									X							X											
	Mattel, Inc.			X										X								X										
	Merck & Co., Inc.				X									X									X									
	Motorola, Inc.				X									X								X										
	Nestle				X									X									X									
	Potash Corp. Saskatchewan			X										X								X										
	Regal Beloit Corp.				X									X									X									
	SDC Communications, Inc.					X								X									X									
	Sara Lee Corp.				X									X									X									
	Standard & Poors Deposit			X										X								X										
	Sysco Corporation Receipts				X									X									X									
	Toys R Us			X										X							X											
	U. S. West Communications				X									X									X									
	Vadafone Airtouch Group				X									X							X											E
	ML Eurofund FD CL A				X									X											X							P
	Templeton Foreign Fund					X								X										X								P
	ML Technology Vent LP		X													X					X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH Page 7 of 16

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	The following investments are held in the James A. Leach Trust:																															
	CMA Money Fund								X							X											X					P
	Dayton Hudson Corp.					X								X								X										P
	H. J. Heinz Co.				X									X							X											P
	Medtronic, Inc.					X								X							X											P
	Merck & Co., Inc.				X									X							X											P
	Nokia Corp.					X								X							X											P
	Pfizer, Inc.				X									X								X										P
	Seagram Co.					X								X								X										P
	Texas Utils				X									X							X											P
	Merrill Lynch IRA Account:																															
	Singapore Air				X									X									X									
	Retirement Reserves Fund			X												X							X									P
	Merrill Lynch IRA Account:																															
SP	Singapore Air				X									X									X									
SP	Retirement Reserves Fund			X												X							X									P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH Page 8 of 16

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other: Type of income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	The following securities are																															
	held by Merrill Lynch:																															
SP	CBA Money Fund				X											X									X							P
SP	Cais Internet, Inc.					X								X							X											P
SP	Cisco Systems, Inc.				X									X							X											P
SP	Coca Cola				X									X								X										P
SP	Dell Computer Corp.				X									X							X											P
SP	GATX Corporation			X										X									X									
SP	Lee Enterprises, Inc.				X									X									X									
SP	Singapore Airlines			X										X								X										
DC	GATX Corporation			X										X									X									
DC	Lee Enterprises						X							X										X								
DC	Singapore Air				X									X									X									
DC	Domtar, Inc.			X										X								X										
DC	CBA Money Fund					X										X								X								P
DC	MidAmerican Energy	X												X												X						S
DC	UAL Corp.			X										X							X											
DC	Norwest Bank		X													X						X										P
	Congressional Credit Union				X											X						X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Norwest Bank IRA Account:																															
SP	Retirement Savings Certificates			X												X						X										
	Retirement Savings Certificates			X												X						X										
SP	Wyoming Mineral Rights			X											X											X						
SP	The Canderock Group Club		X											X								X										
DC	Rough Pine Productions LLC		X											X							X											

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Name JAMES A. LEACH Page 10 of 16

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-98		X								
	Adel Wholesalers, Incorporated		X	X	07/30/99							X			
	Merrill Lynch CMA		X		Various					X					
	Airtouch Communications		X		06/30/99	X									
	Ameritech Corp.			X	Various		X								
	CMA Treasury Fund		X		Various	X									
	Vadafone Airtouch			X	Various		X								
	ML Eurofund FD CL A	X			Various										
	Templeton Foreign Fund	X			Various										
	CMA Money Fund	X			Various						X				
	Dayton Hudson Corp.	X			10/12/99			X							
	H. J. Heinz Co.	X			10/12/99		X								
	Medtronic, Inc.	X			10/12/99			X							
	Merck & Co., Inc.	X			10/12/99		X								
	Nokia Corp.	X			10/12/99			X							
	Pfizer, Inc.	X			10/12/99		X								
	Seagram Co.	X			10/12/99			X							

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SCHEDULE IV — TRANSACTIONS

Name JAMES A. LEACH

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-98		X								
	Texas Utils	X			10/12/99		X								
	Retirement Reserves Fund	X			Various	X									
SP	Retirement Reserves Fund	X			Various	X									
SP	CBA Money Fund	X			Various	X									
SP	Cais Internet, Inc.	X			11/12/99			X							
SP	Cisco Systems, Inc.	X			11/12/99		X								
SP	Coca Cola	X			11/12/99		X								
SP	Dell Computer Corp.	X			11/12/99		X								
DC	CBA Money Fund	X			Various			X							
DC	MidAmerican Energy		X		03/17/99	X									
DC	Norwest Bank	X			Various	X									
	Mehta Tech Holdings, Inc.			X	07/30/99					X					

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	First Midwest Mortgage Corp. Joliet, IL	Mortgage on Iowa Residence					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51, re-numbered as clause 5 of House Rule 26 in the 106th Congress) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NA		

Use additional sheets if more space is required.

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
NA		

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The World Economic Forum, Davos, Switzerland	January 27 - February 2, 1999	Washington, DC to Davos, Switzerland to Washington, DC	Y	Y	Y	NO
Iowa Independent Bankers Association	July 16, 17, 1999	Washington, DC to Lake Okoboji, Iowa, to Washington, DC	Y	Y	N	NO
The Century Foundation (previously The Twentieth Centruy Fund)	November 18, 19, 1999	Washington, DC to New York City, NY to Washington, DC	Y	Y	N	NO
The Kettering Foundation, Dayton, Ohio	November 29, 30, 1999	Cedar Rapids, Iowa to Dayton, Ohio to Cedar Rapids, Iowa	Y	Y	N	NO

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Vice Chair of the Board (unpaid)	The Century Foundation (formerly The Twentieth Century Fund) (non-profit educational foundation)
Member of the Board (unpaid)	Johns Hopkins University School of Advanced International Studies Advisory Council
Member of Board (unpaid)	The Kettering Foundation, Dayton, Ohio (non-profit educational foundation)
Member of the Board (unpaid)	Project Vote Smart (non-profit voter education foundation)
Member of the Board (unpaid)	Internews Network Inc. (non-profit organization that assists in the development of a free and independent media worldwide)
Member of Congressional Advisory Committee (unpaid)	John E. Moss Foundation (non-profit foundation promoting the publics interest in Congress)
Member of Congressional Advisory Board (unpaid)	The Victims of Communism Memorial Foundation (non-profit)

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NA	

JAMES A. LEACH
1ST DISTRICT, IOWA

COMMITTEES:
BANKING AND FINANCIAL SERVICES
CHAIRMAN

INTERNATIONAL RELATIONS

CONGRESS OF THE UNITED STATES

June 13, 2000

HAND DELIVERED

00 JUN 13 PM 3:42

RECEIVED

MC

7

The Honorable Jeff Trandahl
The Clerk
U.S. House of Representatives
Washington, D.C. 20515

Dear Mr. Trandahl:

I am writing to provide your office with an amendment to my financial disclosure statement for calendar year 1999.

Enclosed please find an original and 2 copies of a revised schedule III for that statement. Please substitute this material for the section III originally submitted. The revision consists of the reporting of capital gains received as a result of the sale of Adel Wholesalers, Inc., reported on page 4 which was inadvertently not included in the original filing.

Thank you for your attention to this matter.

Sincerely,

James A. Leach
Member of Congress

JL:bt

enclosure

OFFICES:
2186 RAYBURN HOUSE OFFICE BLDG.
WASHINGTON, DC 20515-1001
(202) 225-6576
Fax (202) 226-1278

209 WEST FOURTH STREET
DAVENPORT, IA 52801-1307
(319) 326-1941
Fax (319) 326-5464

102 S. CLINTON, 505
IOWA CITY, IA 52240-4025
(319) 351-0789
Fax (319) 351-6789

1736 1ST AVENUE NE
CEDAR RAPIDS, IA 52402-5433
(319) 363-4773
Fax (319) 363-6008

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name JAMES A. LEACH Page 4 of 16

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan over which you have investment power, provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	$15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	*Examples:* Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	Adel Wholesalers, Incorporated	X												X			X												X			S, E
	Leach Family Farms, Inc.							X						X													X					
	Mehta Tech, Inc.							X								X											X					
	Foxley Cattle Company									X				X														X				
	Merrill Lynch CMA								X							X											X					S
	Mehta Tech Holdings, Inc.							X						X															X			E

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

Page 5 of 16

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	The following investments are held in the Lois Hill Leach Trust:																															
	CMA Treasury Fund				X											X							X									S
	Michigan Mun. Bd. Auth. Dev.					X										X									X							
	Airtouch Communications	X												X										X								S
	AT&T Corp.				X									X									X									
	Amn Water Works			X										X									X									
	Ameritech Corp.	X												X									X									E
	Bell Atlantic Corp.				X									X									X									
	BellSouth Corp.				X									X									X									
	Boeing Company				X									X									X									
	Bristol Myers Squibb Co.				X									X									X									
	Domtar, Inc.			X										X								X										
	Ericsn LM Tel.						X							X									X									
	FPL Group, Inc.			X										X									X									
	GATX Corp.				X									X									X									
	General Electric					X								X									X									
	IMC Global Inc. Dev PV			X										X								X										
	Intl Flavors & Fragrances			X										X									X									
	Kansas City Power & Light			X										X									X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Lucent Technologies				X									X								X										
	Lee Enterprises, Inc.			X										X									X									
	Lee Enterprises, Inc. CLB			X										X									X									
	Media One Group, Inc.				X									X							X											
	Mattel, Inc.			X										X								X										
	Merck & Co., Inc.				X									X									X									
	Motorola, Inc.				X									X								X										
	Nestle				X									X									X									
	Potash Corp. Saskatchewan			X										X								X										
	Regal Beloit Corp.				X									X									X									
	SDC Communications, Inc.					X								X									X									
	Sara Lee Corp.				X									X									X									
	Standard & Poors Deposit			X										X								X										
	Sysco Corporation Receipts				X									X									X									
	Toys R Us			X										X							X											
	U. S. West Communications				X									X									X									
	Vadafone Airtouch Group				X									X							X											E
	ML Eurofund FD CL A				X									X												X						P
	Templeton Foreign Fund					X								X											X							P
	ML Technology Vent LP		X													X					X											

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
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	The following investments																														
	are held in the James A.																														
	Leach Trust:																														
	CMA Money Fund								X							X											X					P
	Dayton Hudson Corp.					X								X								X										P
	H. J. Heinz Co.				X									X							X											P
	Medtronic, Inc.					X								X							X											P
	Merck & Co., Inc.				X									X							X											P
	Nokia Corp.					X								X							X											P
	Pfizer, Inc.				X									X								X										P
	Seagram Co.					X								X								X										P
	Texas Utils				X									X							X											P
	Merrill Lynch IRA Account:																														
	Singapore Air				X									X									X									
	Retirement Reserves Fund			X												X							X									P
	Merrill Lynch IRA Account:																														
SP	Singapore Air				X									X									X									
SP	Retirement Reserves Fund			X												X							X									P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME
Continuation Sheet (If needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	The following securities are held by Merrill Lynch:																														
SP	CBA Money Fund				X											X									X						P
SP	Cais Internet, Inc.					X								X							X										P
SP	Cisco Systems, Inc.				X									X							X										P
SP	Coca Cola				X									X								X									P
SP	Dell Computer Corp.				X									X							X										P
SP	GATX Corporation			X										X									X								
SP	Lee Enterprises, Inc.				X									X									X								
SP	Singapore Airlines			X										X								X									
DC	GATX Corporation			X										X									X								
DC	Lee Enterprises						X							X										X							
DC	Singapore Air				X									X									X								
DC	Domtar, Inc.			X										X								X									
DC	CBA Money Fund					X										X								X							P
DC	MidAmerican Energy	X												X												X					S
DC	UAL Corp.			X										X							X										
DC	Norwest Bank		X													X						X									P
	Congressional Credit Union				X											X						X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES A. LEACH

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Norwest Bank IRA Account:																															
SP	Retirement Savings Certificates			X												X						X										
	Retirement Savings Certificates			X												X						X										
SP	Wyoming Mineral Rights			X											X											X						
SP	The Canderock Group Club		X											X								X										
DC	Rough Pine Productions LLC		X											X							X											

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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HAND DELIVERED
(Office Use Only)

BARBARA LEE
(Full Name)

U. S. HOUSE OF REPRESENTATIVES, 414 CANNON HOB, WASHINGTON, D.C. 20215
(Mailing Address)

Daytime Telephone
(202) 225-2661

Filer Status [X] Member of the U S House of Representatives — State CA District 9 [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.** — Yes [X] No [ ]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Barbara Lee	May 15, 2000

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Name BARBARA LEE

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a "self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "N/A" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples.* SP Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	RENTAL PROPERTY: 1526 ATLANTA AVE, PORTSMOUTH, VA				X										X						X											
	W.C. PARRISH CO. INC. NOTE FROM SALE OF BUSINESS						X													NOTE PAYMENTS							X					
	PAYMENTS RECEIVED FROM GUILLTONE PROPS. INC.																															
	RENTAL PROPERTY: 9 CITY CT SACRAMENTO, CA (50% OWNERSHIP)						X								X											X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BARBARA LEE

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	MERRILL LYNCH RETIREMENT ACCOUNT INCLUDES FOLLOWING:				X									X		X						X									
	MERRILL LYNCH MONEY MARKET			X												X						X									
	CBS CORPORATION STOCK			X													X									X					S
	ADAPTIVE BROADBAND CORP (FORMERLY CALIFORNIA STOCK MICROWAVE INC. - NAME CHANGED ON 5/7/99)			X													X									X					S
	GNL DATACOMM IND. INC. STOCK			X																	X										
	SAKS INC. TENN PV STOCK			X																	X										P
	XEROX CORP. STOCK			X																	X										P
	SILICON GRAPHICS INC. STOCK			X																	X										P
	MANULIFE FINANCIAL RETIREMENT ACCOUNT INCLUDES FOLLOWING MUTUAL FUNDS:				X											X							X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name BARBARA LEE

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	MANULIFE EMERGING SMALL			X																	X											
	COMPANY																															
	MANULIFE EQUITY INCOME		X																		X											
	MANULIFE MONEY MARKET			X																	X											
	MANULIFE INVESTMENT		X																		X											
	QUALITY BOND																															
	STATE OF CALIFORNIA																															
	SAVINGS PLUS DEFERRED																															
	COMP. PROGRAM - HELD IN																															
	THE FOLLOWING FUNDS:																															
	T. ROWE PRICE EQUITY			X																	X											
	INCOME FUND																															
	SPP 500 INDEX FUND				X																X											
	T. ROWE PRICE NEW				X																X											
	HORIZONS FUND																															
	Merrill Lynch CMA						X									X										X						

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SCHEDULE IV — TRANSACTIONS

Name BARBARA LEE

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	CBS CORPORATION STOCK		X		11-3-99	X									
	ADAPTIVE BROADBAND CORP. STOCK		X		11-23-99	X									
	(FORMERLY CALIF. MICROWAVE INC.) (PARTIAL SALE OF STOCK)		X		12-28-99	X									
	SAKS INC. TENN PV (PURCHASE OF ADDITIONAL STOCK)	X			11-3-99	X									
	XEROX CORP. STOCK	X			11-3-99	X									
	---	X			12-28-99	X									
	SILICON GRAPHICS INC. STOCK	X			11-23-99	X									

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SCHEDULE V — LIABILITIES

Name BARBARA LEE

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	WELLS FARGO BANK	ASSUMED BY GUILLTONE PROPERTIES, INC. EFFECTIVE 7/99					X					
	ATLANTIC MORTGAGE (formerly WEYERHAUSER MORTGAGE)	MORTGAGE ON 9 CITY COURT, SACRAMENTO, CA				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D C —Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
CHRISTOPHER REYNOLDS FOUNDATION, AREA FOUNDATION, GENERAL SERVICE FOUNDATION (FACT-FINDING)	Feb. 17-21	San Francisco--Havana, Cuba --San Francisco	Y	Y	N	N
THE ASPEN INSTITUTE (BIPARTISAN CONGRESSIONAL RETREAT)	Mar. 19-21	Wash.,D.C.--Hershey, PA-- Wash.,D.C.	Y	Y	N	N
AMERICAN ISRAEL EDUCATION FOUNDATION (EDUCATIONAL MISSION)	Aug. 25 - Sept. 2	Wash., D.C.--Tel Aviv-- Wash., D.C.	Y	Y	N	N
HAITIAN AMERICAN PUBLIC HEALTH INITIATIVES (ATTEND BOARD MEETING/SPEECH)	Sept. 24-27	Wash. D.C.--Boston-- Wash. D.C.	Y	N	N	Y

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE	GHANA CHILDREN'S FUND (NONPROFIT PUBLIC BENEFIT CORPORATION, A PROJECT OF THE EAST BAY COMMUNITY FOUNDATION)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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OFFICE OF THE CLERK

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Hon. Sander M. Levin
(Full Name)

2268 Rayburn Bldg.
(Mailing Address)

Washington, DC 20515
Daytime Telephone 202/225-4961

Filer Status	[X] Member of the U S House of Representatives	State MI District 12	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	X	
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**		X
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. § 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Sander M. Levin	5-12-2000

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Name Hon. Sander M. Levin	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Victoria Levin, National Institute of Mental Health	Spouse Salary	$69,863.85

For payments to charity in lieu of honoraria, use Schedule II.

Name Hon Sander M Levin	Page___ of ____

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honoranum
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1999 Aug 13, 1999	$2,000 $ 500
	KMart Family Foundation: Donations to: Southfield Community Coalition for the Prevention of Substance Abuse and Violence - $250; Utica Community Action Team - $250	Kids Race Against Drugs in Washington, DC	9-22-99	$500.00

Name Hon. Sander M. Levin | Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if re-invested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Wright Patman Federal Credit Union	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT First Union	$1,001 - $15,000	Interest	$1 - $200	NA
Michigan National Bank	$1 - $1,000	Interest	$1 - $200	NA
JT 1/2 interest in 78A, 1/6 interest in 18A, Tyrone Township, Michigan	$50,001 - $100,000	NA	None	NA
1/9 undivided interest in commercial real estate, West Maple, Birmingham, Michigan	$100,001 - $250,000	Rent	$15,001 - $50,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	5.3 % interest in accounts receivable from Hayden Gregory previously held by LNS Co., a general partnership now liquidated.	$1,001 - $15,000	NA	None	NA
	5.3% interest in Michigan mineral rights previously held by LNS Co., a general partnership now liquidated (see attached)	$15,001 - $50,000	NA	$5,001 - $15,000	Royalty
	5.3% interest in LRS Co., a general partnership owning real estate in Romulus and Pontiac Townships, Michigan and accounts receivable	$1,001 - $15,000	NA	None	NA
JT	Vacation House, Lot 4, West Tisbury, MA	$250,001 - $500,000	Rent	$15,001 - $50,000	NA
JT	Martha's Vineyard Cooperative Bank	$1,001 - $15,000	Interest	$1 - $200	NA
JT	Loan: Clark and Bonnie Barnes, Victoria Rd., Tyrone Township Livingston Co., Michigan	$1,001 - $15,000	NA	None	NA
SP	IRA-Merrill Lynch (see attachment)	$15,001 - $50,000	Dividends	$201 - $1,000	NA
	KEOGH - Merrill Lynch (see attachment)	$50,001 - $100,000	Dividends	$5,001 - $15,000	NA

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

ATTACHMENT:

5.3% interest in Michigan mineral rights previously held by LNS Co., a general partnership now liquidated: Shell Western - income - $125; Michigan Consolidated Gas Co. - income -$112; Antrim Gas - income - $0; and Mercury Exploration Co., an assignee from a previous lease - income - $1,608; Quicksilver Pipeline LLC, assignee from previous lease - income - $639; Dominion Midwest Energy, assignee from previous lease - income - $3,919; and HRF Exploration, assignee from previous lease - income - $122. The year-end value of these interests are estimated herein based on latest available information and technical advice.

ATTACHMENT:

1. IRA - Merrill Lynch Portfolio
   - Merrill Lynch Growth Fund CL D
   - Merrill Lynch Federal Securities Trust CL D
   - Merrill Lynch Retirement Reserves Money Market

2. KEOGH - Merrill Lynch Portfolio

   Money Purchase Plan:
   - Merrill Lynch Growth Fund CL D
   - Merrill Lynch Basic Value Fund CL B
   - Fidelity Advisor Ser VII Overseas Portfolio CL T
   - Merrill Lynch Retirement Reserves Money Market

   Profit Sharing Plan:
   - Merrill Lynch Growth Fund CL D
   - Fidelity Advisor Growth Opportunities Portfolio CL T
   - Merrill Lynch Basic Value Fund CL B
   - Fidelity Advisor Ser VII Overseas Portfolio CL T
   - Merrill Lynch Retirement Reserves Money Market

Name Hon. Sander M. Levin	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Countrywide Home Loans	Mortgage on vacation house, West Tisbury, MA	$250,001 - $500,000
JT	Bank of Boston	Equity loan on vacation house, West Tisbury, MA	$15,001 - $50,000

Name Hon Sander M Levin	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar. 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Harvard University and The Commonwealth Fund	Jan 21-23, 1999	DC-Aventura, Florida-Detroit	Y	Y	Y	NA
Aspen Institute	Mar 28-Apr. 5, 1999	DC-Beijing-Shanghai-Toyko-DC	Y	Y	Y	NA

Name Hon. Sander M. Levin	Page ____ of ____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Partner	LSR Company

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 12:28
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(22)

HAND DELIVERED
(Office Use Only)

MC

Jerry Lewis
(Full Name)

2112 Rayburn House Office Bldg. (202) 225-5861
Wash. DC. 20515
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U S House of Representatives	State District CA 40	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Copy of Financial Disclosure Statement of Spouse is attached

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jerry Lewis	5/15/00

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Name Jerry Lewis	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9 000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1 000
	Ontario County Board of Education	Spouse Salary	NA
	Legislators' Retirement System, State of CA.	Legislative Pension	$ 3,381.00

For payments to charity in lieu of honoraria, use Schedule II.

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Name Jerry Lewis | Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
NONE			

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Name Jerry Lewis

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction
SP	Examples: Mega Corp. Stock					X								X																			P
DC	Simon & Schuster		Indefinite																	Royalties									X				S
JT	1st Bank of Paducah, KY accounts						X									X									X								E
	631 Constitution Ave. NE, Wash. D.C. 20002								X						X												X						P
	Charles Schwab & Co. Inc. IRA-Cash & Odwalla stock				X												NONE									NONE							
	Lewis Family Trust-1/4 St. (copy attached)					X									Trust distributions									X									

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name	Page of

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P. S E
	Odwall, Inc common stock						X									NONE								NONE								
	Congressional Federal Credit Union				X											X							X									
	1120 4½ C St. N.E. Wash. D.C. 20002						X										X											X				S
	Parcel 13 as shown on map 4416 recorded May 23, 1979, BK 47, Pgs 65-66, County of San Bernardino				X											NONE								NONE								
	Penn Mutual Life Insurance & Retirement							X								NONE								NONE								
	Legislators' Retirement System, St of Cal						X								Legislative Pension									X								
	Arrowhead Credit Union San Bernardino, Cal.			X												X						X										

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SCHEDULE IV — TRANSACTIONS

Name Jerry Lewis

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10–12–99		X								
	1120 ½ C St. N.E. Wash. D.C. 20002		X		2-11-99				X						

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Name Jerry Lewis | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example.	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Mellon Mortgage	Mortgage on 1120 4 Cdl. Wash. DC 20002			X							
	BOMCC - refinanced with Greater Atlantic Bank in VA in 1999	Mortgage on 631 Constitution Ave Wash D.C. 20002					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

Name Jerry Lewis | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	SRINCON CORP.	APRIL 8 + 9	DRIVE SELF FROM Redlands, CA. to San Diego CA	Y	Y	Y	N

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Name	Page 1 of 1
Jerry Lewis	

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Board of Directors	Loma Linda University Children's Hospital

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
July '55	Penn Mutual Life Insurance Co.	Agent Retirement Plan
1969	Legislators' Retirement System, State of CA.	

GPO 2000 62 753 (mac)

Use additional sheets if more space is required.

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CONTINUATION OF EDWARD R. LEWIS AND ELAINE L. LEWIS TRUST

The undersigned, Richard J. Lewis, Edward R. Lewis, Jr., C. Jeremy Lewis, and John C. Lewis are the vested sole beneficiaries of the Edward R. Lewis and Elaine L. Lewis Trust executed June 15, 1983, a copy of which is attached hereto. Following the deaths of Edward R. Lewis and Elaine L. Lewis, outright distribution has been made of some of the assets of this Trust, but the assets listed on Schedule A attached hereto continue to be held by C. Jeremy Lewis as Trustee of said Trust for the benefit of all of the undersigned.

The undersigned hereby agree that said property shall continue to be held, administered, and distributed by Trustee of said Trust in accordance with the provisions of said Trust as modified by this instrument.

1. Purpose. The purpose of this Trust as hereby extended shall be for Trustee to manage the assets of this Trust, collect all payments on obligations owed, divide and distribute the proceeds equally between us, liquidate all tangible assets of this Trust, and make distribution of the net proceeds to us.

2. Term. The term of this Trust shall be for so long as necessary to sell the real property and obtain complete payment on all notes and contracts which are the subject of this Trust, or for 10 years from the date of this instrument, whichever first occurs. At the expiration of this Trust, outright distribution shall be made by Trustee to the undersigned in equal shares, if all of them living, or to the successor beneficiaries of each of us as designated on the beneficiary designation of each, if any of us is not living at the time a distribution is to be made.

3. Beneficiary Designations. For so long as each of us are living, all distributions shall be made in equal shares to each of us, with Trustee holding such reserves as Trustee may deem appropriate for the management of the Trust estate. Upon the death of any of us prior to the termination of this Trust, the share of this Trust allocable to such deceased person and all distributions being made for such person shall be delivered to the beneficiaries designated for such person in accordance with the Beneficiary Designation of such deceased person delivered to Trustee. If no Beneficiary Designation has been executed by any of us at the time of the death of any of us or Trustee has not received the original of such Beneficiary Designation when a distribution is to be made, distribution of such deceased person's share shall be made without the need for any probate administration to the beneficiaries of such deceased person's last Will, or if there is no Will, to such deceased beneficiary's intestate heirs according to California's laws of intestate succession. If Trustee has any doubt as to the appropriate distribution to be made, Trustee may, in Trustee's sole discretion, make distribution to the estate of the one of us as to

whom the ambiguity exists or may petition the Court for instructions as to the appropriate distribution. Each of us may modify his Beneficiary Designation at any time by sending to Trustee a duly executed revision and, upon receipt of such change of Beneficiary Designation by Trustee, such change shall be effective.

3.1 Each of us shall be considered as the primary beneficiary of his share of this Trust, and the designated successor beneficiaries shall have no rights or powers concerning this Trust until the interests of such successor beneficiaries vest upon the death of one of us.

3.2 Notwithstanding anything set forth above, Trustee may, in Trustee's sole discretion, at any time elect to distribute all of the assets of this Trust in undivided shares equally between the four primary beneficiaries of the Trust; provided, however, if any of us is then deceased, the distribution of the share of such deceased one of us shall be made to the designated beneficiaries of such deceased person.

4. Additional modifications of Trust. This Trust may be amended at any time by written document executed by the four of us and may be revoked by written document executed by the four of us. It may not be amended or revoked in any other manner.

Executed effective December 1, 1989.

Richard J. Lewis

Edward R. Lewis, Jr.

C. Jeremy Lewis

John C. Lewis

Approved as to form:
GRESHAM, WARNER, SAVAGE, NOLAN & TILDEN

By: _____
Philip H. Savage, III

All assets in the Edward R. and Elaine L. Lewis Trust dated June 15, 1983 remaining following outright distribution after the death of Edward R. Lewis on May 13, 1988, including but not limited to the following:

1. Note dated 5-18-78 in the amount of $11,933.14 by Mark E. Brandlin, at 7% per annum, payments of $125.00 payable on the 1st day of each calendar month, commencing on 5-1-78, secured by deed of trust recorded 9-4-79 as Instrument 1034, in Book 9763, Page 1571. Reconveyed

2. Note dated 7-18-84 in the amount of $31,750.00 by Robert Bresnahan and Carolyn Bresnahan and Carolyn Bresnahan as joint tenants, and Rob Bresnahan, at 7% per annum, payments of $250.00 payable on the 18th day of each calendar month, commencing on 7-18-79, secured by deed of trust recorded 8-27-84 as Instrument 84-204415.

3. Note dated 9-1-78 in the amount of $23,245.00 by Gerald W. Bromley and Phyllis Bromley, joint tenants, at 7% per annum, payments of $175.00 payable on the 1st day of each calendar month, commencing 10-1-78, secured by deed of trust recorded 9-4-79 as Instrument 1035, in Book 9763, Page 1572.

4. Real property in San Bernardino County, CA, subject to contract for sale dated 10-26-81 for $32,000.00 by Earl D. Burdett.

5. Real property in San Bernardino County, CA, subject to contract for sale dated 10-26-81 for $32,000.00 by Earl D. Burdett.

6. Real property in San Bernardino County, CA, subject to contract for sale dated 9-16-85 for $60,000.00 by Glasscamp, Inc.

7. Real property in San Bernardino County, CA, subject to contract for sale dated 9-16-85 for $32,000.00 by Glasscamp, Inc.

8. Note dated 7-22-75 in the amount of $14,400.00 by Alan G. DeWeese and Margaret M. DeWeese, at 7% per annum, payments of $125.00 payable on the 23rd day of each calendar month, commencing 8-23-75, secured by deed of trust recorded 9-4-79 as Instrument 1031, in Book 9763, Page 1568. - Reconveyed

9. Note dated 9-24-80 in the amount of $12,575.00 by Edward W. Heber, Jr., and Judith A. Heber, at 7% per annum, payments of $125.00 payable on the 1st day of each calendar month, commencing on 10-1-80, secured by deed of trust recorded 1-19-81 as Instrument 81-012555.

10. Note dated 5-8-78 in the amount of $14,404.22 by James A. and Earleen K. Helm, at 7% per annum, payments of $125.00 payable on the 5th day of calendar month, commencing 6-5-78, secured by deed of trust recorded 9-4-79 as Instrument 1038, in Book 9763, Page 1575.

11. Real property in San Bernardino County, CA, subject to contract for sale dated 4-20-73 for $12,000.00 by Randy Don Hopkinson & Georgette M. Hopkinson. - Recovered

12. Note dated 12-24-84 in the amount of $31,750.00 by Sam J. Kahn and Betty L. Kahn as joint tenants, and Robert Craig Bennion and La Ree Bennion as joint tenants, at 7% per annum, payments of $250.00 payable on the 30th day of each calendar month, commencing on 6-30-77, secured by deed of trust recorded 1-2-85 as Instrument 85-000662.

Recovered

13. Real property in San Bernardino County, CA, subject to contract for sale dated 6-13-79 for $32,000.00 by Carl E. Knauff, Peggy Knauff, Randy W. Roach, Barbara Roach, Stephen F. Jaurigue, Kathleen S. Jaurigue, Philippe J. Tatton, and Susan E. Tatton.

Recovered

14. Note dated 4-2-84 in the amount of $15,775.00 by Harold E. Koenig, at 7% per annum, payments of $125.00 payable on the 15th day of each calendar month commencing on 9-25-76, secured by deed of trust recorded 5-17-84 as Instrument 84-116000.

Recovered

15. Note dated 8-31-78 in the amount of $14,000.00 by Albert Lara, at 7% per annum, payments of $125.00 payable on the 30th day of each calendar month, commencing 9-30-78, secured by deed of trust recorded 9-20-79 as Instrument 1137, in Book 9775, Page 1620.

16. Real property in San Bernardino County, CA, subject to contract for sale dated 2-4-84 for $12,000.00 by Richard J. and Donna F. Lewis.

17. Real property in San Bernardino County, CA, subject to contract for sale dated 10-16-79 for $32,000.00 by Marilyn L. Mahan.

18. Note dated 4-1-84 in the amount of $23,600.00 by Michael B. Oliver and Sheila R. Oliver, joint tenants, at 7% per annum, payments of $175.00 payable on the 15th day of each calendar month, commencing on 7-15-77, secured by deed of trust recorded 5-17-84 as Instrument 84-116062.

Recovered

19. Note by Harold J. Petty and Netty L. Petty at 7% per annum secured by deed of trust recorded as Instrument No. 913 on Dec. 19, 1979 in Book 9583, Page 1403.

20. Note dated 9-28-76 in the amount of $14,011.86 by Melvin L. Smith, Jr., and Marilyn A. Smith, joint tenants, at 7% per annum, payments of $125.00 payable on the 21st day of each calendar month, commencing on 10-21-76. Paid off

21. Real property in San Bernardino County, CA, subject to contract for sale dated 5-2-85 for $12,102.28 by Frances M. Stephenson and Austin Shrack.

22. Note dated 4-7-83 in the amount of $28,450.85 by Pauline R. Walton and Bobbie R. Skinner, at 7% per annum, payments of $250.00 payable on the 15th day of each calendar month, commencing 4-15-83, secured by deed of trust recorded 4-19-83 as Instrument 83-082026.

23. Real property in Los Angeles County, CA, subject to contract for sale dated 1-20-88 for $10,000.00 by Rommel Agee.

24. Lot 32 Area 43,608 sq. ft. in Block 265 as delineated on the map entitled Hawaiian Ocean View Estates which said map was filed in the Bureau of Conveyances of the State of Hawaii 4-5-62 as File Plan 787.

25. Improved real property situated in San Bernardino, CA, at 5328 Park Lane, described as: [illegible]

Lot 2, Tract 5123 as per plat recorded in Book 62 of maps, page 23, records of San Bernardino County, Assessor's Parcel 154-051-37. - Sold in 1991

26. Improved real property situated in San Bernardino, CA, at 5634 Argyle Street, described as: - Sold in 1990

Lot 29, Tract 5095 as per map recorded in Book 75 of Maps, pages 23-24 in the office of the County Recorder of San Bernardino County.

27. ~~Pacific Savings Bank Account #~~ 0535262-0 - Transferred to Ex. Acct.

28. Franklin Fund - Sold in 1991
California Tax-Free Income Fund - Account No. 112043617 24

29. Parcel No. 7 as shown on Parcel Map No. 4416 recorded May 23, 1979 in Parcel Map Book No. 47, pages 65 and 66 in the office of the County of San Bernardino, State of California. Quitclaimed to trust by Richard Lewis 9/17/91.

C. Jeremy Lewis

John C. Lewis

Edward R. Lewis

Richard J. Lewis

29. -

Form A

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999 | For use by Members, officers, and employees

Arlene M. Willis
(Full Name)
2112 Rayburn House Office Bldg.
(Mailing Address)
(202)-225-5861
Daytime Telephone
Wash. DC 20515

(Office Use Only)

Filer Status	☐ Member of the U S House of Representatives	State District	☒ Officer or Employee	Employing Office Jerry Lewis
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Copy of Financial Disclosure Statement of Spouse is attached

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒	No ☐
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, § 104 and 18 U S C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Arlene M. Willis	5-15-00

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Name Arlene M. Willis | Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Only as shown on Financial Disclosure Statement of Spouse, copy attached		

For payments to charity in lieu of honoraria, use Schedule II.

Name Arlene McWillis | Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	NONE			

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Name Arlene M Willis | Page 1 of 1

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period; and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP/DC/JT	Block A	Block B	Block C	Block D	Block E
SP	Mega Corp Stock	F: $100,001 – $250,000	DIVIDENDS	VI: $5,001 – $15,000	P
DC	Simon & Schuster	E: $50,001 – $100,000	RENT		
JT	1st Bank of Paducah KY accounts	F: $100,001 – $250,000	INTEREST		
			CAPITAL GAINS		
			EXCEPTED TRUST		
			QUALIFIED BLIND TRUST		
			Other Type of Income (Specify: For Example: Partnership Income or Farm Income): Royalties		

All as shown on Financial Disclosure Statement of Spouse, copy attached hereto and

Charles Schwab & Co. – IRA consisting of cash & UDwalla stock

NONE

NONE

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name Arlene M. Willis

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
	Only as shown on Financial Disclosure Statement of Spouse attached hereto.														

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Name Arlene M. Willis | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Only as shown on Financial Disclosure Statement of Spouse attached hereto	- Copy										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

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Name Helene M. Willis | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Only as shown on Financial Disclosure Statement of Spouse, copy attached hereto						

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Name	Page
Arlene M. Willis	1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 16 AM 11:26

Honorable John Lewis (Full Name)

343 Cannon HOB (Mailing Address)

x5-3801 Daytime Telephone

HAND DELIVERED me (Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State GA District 5th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John Lewis	May 15, 2000

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honorana; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Clark Atlanta University	spouse's salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name Hon. John Lewis	Page 3 of 10

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples. Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500

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Name Hon. John Lewis | Page 4 of 10

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investment(s), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster			Indefinite															Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Hon. John Lewis

Page 5 of 10

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P. S. E

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Name Hon. John Lewis | Page 6 of 10

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				x						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	NJ Performing Arts Center	Jan 12-14	Atlanta-NY-Atlanta	Y	Y	N	N
	Brooklyn Academy of Music	Jan 17-18	DC.-NY-DC.	Y	Y	N	N
	Groton School	Feb 16-17	Atlanta-Providence-DC	Y	Y	N	N
	Eagleton Inst/Rutgers Univ.	Feb 18	DC-NY-Los Angeles	N	Y	N	N
	Avnet/Kerner Productions	Feb 19-20	Los Angeles-Atlanta	Y	Y	N	N
	Hotel & Restaurant Empl. Union	Feb 28-Mar. 2	Atl-Las Vegas-DC	Y	Y	N	N
	Westchester University	Mar. 21-22	Atl-Philg/Westchester-Atl	Y	Y	N	N
	Principia College	Apr. 2-3	Atl-St Louis/Elsah-Atl	Y	Y	N	N
	Harcourt/Harvest Books	Apr. 30-May 2	Atl-LA-Atl	Y	Y	N	N
	Johnson C. Smith Univ	May 2	Atl-Charlotte-Atl.	N	Y	N	N
	Presidential Library in Hyde Park	May 6-8	DC-White Plains-DC	Y	Y	N	N
	Dillard University	May 9-10	DC-New Orleans-DC	Y	Y	N	N
	Cleveland Public Library	May 13	DC-Cleveland-DC	N	Y	N	N
	Univ of Massachusetts	June 4-5	Atl-Boston-Atl	Y	Y	N	N

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	NY MLK Ctr. for Nonviolence	June 15-16	DC - NY - DC	Y	Y	N	N
	Northeastern University	June 18-19	DC - Boston - Atlanta	Y	Y	N	N
	Unite-unions, Needle trades	June 27-29	Atl - Miami - Atl	Y	Y	N	N
	Lutheran Church - Missouri Synod	June 22-23	Atl - Birmingham - Atl	Y	Y	N	N
	YMCA of Worcester	Aug. 20-21	Atl - Boston - ~~Atlantic City~~ Phila	Y	Y	N	N
	John Henry "Pop Lloyd" Committee of Cleveland	Aug 21-22	Boston - Phila/Atlantic City - Atl.	Y	Y	N	N
	Jewish Community Federation	Aug. 30-31	Atl - Cleveland - Atl	Y	Y	N	N
	NAACP, Newport Branch	Sept. 4-5	Atl - Providence - Atl.	Y	Y	N	N
	NAACP, Zebulon Branch	Sept. 25-26	DC - Raleigh - DC	Y	Y	N	N
	The Abraham Fund	Oct. 20-21	DC - NY - DC	Y	Y	N	N
	ACLU of Philadelphia	Oct. 27	DC - Phila - DC	N	Y	N	N
	Harcourt/Harvest Books	Nov. 12-14	Atl - Sarasota - St. Petersburg - Atl	Y	Y	N	N
	Bates College	Nov. 24-30	Atlanta - Portland, Me - DC	Y	Y	N	N
	Minnesota Dept. of Human Rights	Dec. 3	DC - Minneapolis - DC	N	Y	N	N

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	(Black Caucus & to Am. Library Assoc.) Assoc. of African American Librarians	July 29-30	Atl - Las Vegas - DC	Y	Y	N	N
	NY Civil Liberties Union	Nov 8-9	DC - NY - DC	Y	Y	N	N
	Harcourt/Harvest Books	Oct. 16-19	Atl - San Francisco - LA - DC	Y	Y	N	N
	The Christophers	Feb 25-26	DC - NY - DC	Y	Y	N	N
	Nat'l. Conf. of Black Mayors Inc	April 22-23	DC - Denver - Atl.	Y	Y	N	N
	Faith + Politics Institute	Mar. 15	DC - Berlin/Salisbury - DC	N	Y	N	N
	Faith + Politics Institute	Mar. 19-20	DC - Hershey - Atl.	Y	Y	N	N
	Knox College	Feb. 14-15	Atl - Chicago/Moline - Atl.	Y	Y	N	N
		Mar. 5-7	DC - Montgomery/Birmingham/Selma - DC	Y	Y	N	N

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Name Hon John Lewis	Page 10 of 10

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Commission on Presidential Debates
"	Faith and Politics Institute
"	Democrats 2000
"	Stennis Center for Public Service
"	Friends of VISTA, Inc.
"	Robert F. Kennedy Memorial, Inc.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

2737

LEGISLATIVE RESOURCE CENTER
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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Ronald Edward Lewis
(Full Name)

553 Lombardy Drive
(Mailing Address)

Cecilia KY 42701

Daytime Telephone: 202-225-3501

Filer Status [X] Member of the U S House of Representatives — State KY District 02 — [ ] Officer or Employee — Employing Office

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**		X
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	X	
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	X	
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	X	
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS–Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION: Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ron Lewis	5-15-2000

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	K-Mart Kids Race Against Drugs	Appearance	9/22/99	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year For rental property or land, provide an address Provide full names of any mutual funds For a self-directed IRA (i.e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None "	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples*	SP Mega Corp. Stock SP 123 Main St ,Dover, Del. 1st Bank of Paducah, KY accounts	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Duplex Apartment, Mockingbird Dr.; Radcliff, Kentucky	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
SP	Lord Abbett Affiliated (Mutual Fund)	$1 001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
SP	Lord Abbett Bond (Mutual Fund)	$1 001 - $15,000	Capital Gains and Dividends	$201 - $1,000	NA
SP	Oppenheimer Discovery Fund (Mutual Fund)	None	Capital Gains and Dividends	$1,001 - $2 500	S
SP	Oppenheimer Champion Income Fund (Mutual Fund)	None	Capital Gains and Dividends	$1 - $200	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Templeton Developing Markets (Mutual Fund)	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	NA
SP	VKM America Cap Dow 10 (Unit Trust)	None	Capital Gains and Dividends	None	S
SP	VKMAC Strategic 10 (Unit Trust)	None	Capital Gains and Dividends	$1 - $200	S
SP	Heritage Cash Trust	$1 - $1,000	Interest	$1 - $200	NA
SP	American Funds Capital Income (Mutual Fund)	None	Capital Gains and Dividends	$1,001 - $2,500	S
SP	Oppenheimer Equity Income (Mutual Fund)	$1,001 - $15,000	Capital Gains and Dividends	$1,001 - $2,500	NA
SP	VKMAC Strategic 10 (Unit Trust)	$15,001 - $50,000	Dividends	$1 - $200	P
SP	VKM Strategic 10 (Unit Trust)	$1,001 - $15,000	Dividends	$1 - $200	P
SP	New Economy Fund (Mutual Fund)	$1,001 - $15,000	Capital Gains and Dividends	$201 - $1,000	P
SP	Oppenheimer Main Street Fund (Mutual Fund)	$50,001 - $100,000	Capital Gains and Dividends	$1,001 - $2,500	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Oppenheimer Discovery Fund (Mutual Fund)	Sold	1/19/99	$50,001 - $100,000
SP	Oppenheimer Champion Income (Mutual Fund)	Sold	12/29/99	$1,001 - $15,000
SP	VKM America Cap Dow 10 (Unit Trust)	Sold	6/11/99	$1,001 - $15,000
SP	VKMAC Strategic 10 (Unit Trust)	Sold	8/13/99	$15,001 - $50,000
SP	American Funds Capital Income (Mutual Fund)	Sold	12/30/99	$1,001 - $15,000
SP	VKMAC Strategic 10 (Unit Trust)	Purchase	8/13/99	$1,001 - $15,000
SP	VKM Strategic 10 (Unit Trust)	Purchase	6/11/99	$15,001 - $50,000
SP	New Economy Fund (Mutual Fund)	Purchase	12/30/99	$1,001 - $15,000
SP	Oppenheimer Main Street Fund (Mutual Fund)	Purchase	1/19/99	$50,001 - $100,000
JT	Basement Apartment; 504 1st Street, Washington, D.C. 20003	Sold	3/3/99	$100,001 - $250,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	First Federal Savings Bank, Elizabethtown, Kentucky	Mortgage on Rental Property, Mockingbird Drive, Radcliff, Kentucky	$50,001 - $100,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
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Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce Mega Corporation	Mar 2 Aug 6-13	Wash., D.C.-Chicago-Wash., D.C. Wash., D.C.-Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
Harvard University -- John F. Kennedy School of Government	1/21/99 - 1/23/99	Washington, D.C. - Miami, Florida - Washington, D.C.	Y	Y	Y	No

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
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(9)

MC

(Office Use Only)

John Linder
(Full Name)

Post Office Box 942208
(Mailing Address)

Atlanta GA 31141

Daytime Telephone 202-225-4272

Filer Status					
	[X] Member of the U.S. House of Representatives	State GA District 11	[ ] Officer or Employee	Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date	

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [X] No [ ]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS-Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION-Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

SIGNATURE OF REPORTING INDIVIDUAL: John Linder

DATE (Month/Day/Year): 5/11/00

2744

Name John Linder | Page 1 of 1

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

Source		Activity	Date	Amount
Examples.	Association of American Associations, Wash., D C	Speech	Feb 2, 1998	$2,000
	XYZ Magazine	Article	Aug 13, 1998	$ 500
	Building Owners and Managers Association	Speech	Jan 26, 1999	$1,000 00
	American Rental Association	Speech	April 20, 1999	$500 00

Name John Linder	Page 1 of 3

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed* provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account and provide its value at the end of the reporting year. **Exclude**: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block	BLOCK D **Amount of Income** For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Note From Sale Linder Financial Corporation	$500,001 - $1,000,000	Capital Gains	None	
	Grayling Industries, Inc.	$1,000,001 - $5,000,000	Dividends	$100,001 - $1,000,000	
	Professional Funding Corporation	None	None	None	Closed Down at end of 1998 and Assets Liquidated
	AT&T Corporation	$50,001 - $100,000	N.A.	NA	
SP	Cash Fund	$1,001 - $15,000	N.A.	NA	
JT	Roberts Realty R.E.I.T.	$15,001 - $50,000	Dividends	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Cedarwild Resort	$250,001 - $500,000	Rent	$50,001 - $100,000	
	State of Georgia Retirement	$1,001 - $15,000	None	None	
	Note Receivable, ARCCOM Commercial Lending	$15,001 - $50,000	Interest	$2,501 - $5,000	
	Trademark Licensing, Atlanta GA	$1 - $1,000	None	None	
JT	Money Market Fund (Sun Trust Company)	$100,001 - $250,000	Interest	$5,001 - $15,000	
JT	Schwab Account: Data Broadcasting	$1,001 - $15,000	None	None	
	" " South Trust	$15,001 - $50,000	Dividends	$201 - $1,000	
	" " Cash	$50,001 - $100,000	None	None	
	Coca Cola Company	$50,001 - $100,000	N.A.	NA	
	First Union Corporation	$50,001 - $100,000	N.A.	NA	
	Intel Corporation	$100,001 - $250,000	N.A.	NA	
	International Business Machines (IBM)	$100,001 - $250,000	N.A.	NA	
	Microsoft Corporation	$100,001 - $250,000	N.A.	NA	
	Pfizer Incorporated	$100,001 - $250,000	N.A	NA	
	Philip Morris Companies Incorporated	$15,001 - $50,000	N.A.	NA	
	Fidelity Blue Chip Growth	$50,001 - $100,000	N.A.	NA	
	Janus Twenty Fund	$50,001 - $100,000	N.A.	NA	
	Vanguard Index Trust 500	$100,001 - $250,000	N.A.	NA	
	Cash Fund	$1,001 - $15,000	N.A.	NA	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Amcent: Income and Growth	$15,001 - $50,000	N.A.	NA	
SP	Dreyfus Appreciation Fund	$15,001 - $50,000	N.A.	NA	
SP	Vanguard Health Care Fund	$50,001 - $100,000	N.A.	NA	
SP	Vanguard Growth Index Fund	$15,001 - $50,000	N.A.	NA	
SP	Vanguard U.S. Growth Portfolio	$15,001 - $50,000	N.A.	NA	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1998	$15,001 - $50,000
JT	Schwab Account: Data Broadcasting	Purchase	01-08-1999	$1,001 - $15,000
JT	Schwab Account: South Trust	Purchase	02-01-1999	$15,001 - $50,000
	Dodge and Cox Stock Fund	Sold	01-26-1999	$250,001 - $500,000
	Fidelity Convertible Securities Fund	Sold	01-26-1999	$250,001 - $500,000
	IAI Regional Fund	Sold	01-26-1999	$1,001 - $15,000
	Janus Fund	Sold	01-26-1999	$15,001 - $50,000
	Nicholas Fund	Sold	01-26-1999	$15,001 - $50,000
	Selected American Shares	Sold	01-26-1999	$250,001 - $500,000
	Vanguard Health Care Fund	Sold	01-26-1999	$250,001 - $500,000
	AT&T Corporation	Purchase	02-04-1999	$50,001 - $100,000
	Coca Cola Company	Purchase	02-04-1999	$50,001 - $100,000
	First Union Corporation	Purchase	02-04-1999	$50,001 - $100,000
	Intel Corporation	Purchase	02-04-1999	$100,001 - $250,000
	International Business Machines (IBM)	Purchase	02-04-1999	$100,001 - $250,000
	Microsoft Corporation	Purchase	02-04-1999	$100,001 - $250,000
	Pfizer Incorporated	Purchase	02-04-1999	$100,001 - $250,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1998	$15,001 - $50,000
	Philip Morris Companies Incorporated	Purchase	02-04-1999	$15,001 - $50,000
	Fidelity Blue Chip Growth	Purchase	02-02-1999	$50,001 - $100,000
	Janus Twenty Fund	Purchase	02-02-1999	$50,001 - $100,000
	Vanguard Index Trust 500	Purchase	02-02-1999	$100,001 - $250,000
SP	Dodge & Cox Stock Fund	Sold	01-26-1999	$50,001 - $100,000
SP	Fidelity Convertible Securities Fund	Sold	01-26-1999	$15,001 - $50,000
SP	IAI Regional Fund	Sold	01-26-1999	$15,001 - $50,000
SP	Janus Fund	Sold	01-26-1999	$15,001 - $50,000
SP	Nicholas Fund	Sold	01-26-1999	$15,001 - $50,000
SP	Selected American Shares	Sold	01-26-1999	$15,001 - $50,000
SP	Vanguard Health Care Fund	Sold	01-26-1999	$50,001 - $100,000
SP	Ameent: Income and Growth	Purchase	02-02-1999	$15,001 - $50,000
SP	Dreyfus Appreciation Fund	Purchase	02-02-1999	$15,001 - $50,000
SP	Vanguard Health Care Fund	Purchase	02-02-1999	$50,001 - $100,000
SP	Vanguard Growth Index Fund	Purchase	02-02-1999	$15,001 - $50,000
SP	Vanguard U S. Growth Portfolio	Purchase	02-02-1999	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago-Wash , D C	N	N	N	N
Mega Corporation	Aug.6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Americans For Fair Taxation	May 2-3, 1999	DC-Houston-DC	Y	Y	N	No
Americans For Fair Taxation	August 23-25, 1999	DC-Houston-Phoenix-Atlanta	Y	Y	N	No
Americans For Fair Taxation	September 13, 1999	DC-New York City-DC	N	N	N	No
American Legislative Exchange Council	November 12-13, 1999	Atlanta-New Orleans-Atlanta	Y	N	N	No
Americans For Fair Taxation	December 13-15, 1999	Atlanta-Albany-Macon-Columbus-Savannah-Augusta-Atlanta	Y	N	N	No
Citizens for a Sound Economy	December 16-17, 1999	Atlanta-Bedford, NH-Atlanta	Y	N	N	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Director	ARCCOM Commercial Lending, Inc., Atlanta, GA
Director	Trademark Licensing, Inc., Atlanta, GA

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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HAND DELIVERED
(Office Use Only)

William Oliver Lipinski
(Full Name)

1501 Longworth House Office Building
(Mailing Address)

(202) 225-5701
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U S House of Representatives	State IL District 03	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William O. Lipinski	May 15, 2000

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William O. Lipinski Name	Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Rosemarie Partners	salary	$3,600
	23rd Ward Committeeman	salary	$9,000
	Metropolitan Water Reclamation District	spouse salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

Name: William O. Lipinski

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
JT	5838 Partners Bldg							X							X										X							
JT	Standard Federal S&L				X											X									X							
JT	Polish Natl Alliance		X													X					X											
JT	Archer Heights Credit Union		X													X					X											
	Chicago Park District Retirement Fund			X																Pension	X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name: William O. Lipinski

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	IRA Superior Bank				X											X					X											
	IRA Superior Bank				X											X					X											
JT	Keough Plan Standard Federal Savings				X														Retirement plan		X											

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Name: William O. Lipinski

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Amer. Assoc. of Railroads	Jan 10-13	Chicago - Phoenix, AZ - Chicago	Y	Y	Y	N
	Aspen Institute	Feb 12-15	Chgo - St. Petersburg - Chicago	Y	Y	Y	N
	BNSF Railroad	Aug 16-19	Chgo - Seattle, WA - Chicago	Y	Y	Y	1 day

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Name	Page of
William O. Lipinski	6 6

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
23rd Ward Committeeman	23rd Ward Democratic Party Organization

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 10 PM 3:17
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U.S. HOUSE OF REPRESENTATIVES
(10)
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(Office Use Only)

FRANK A. LoBIONDO
(Full Name)

1754 WYNNEWOOD DRIVE
(Mailing Address)

VINELAND, NEW JERSEY 08360

Daytime Telephone (202) 225-6572

Filer Status	[X] Member of the U S House of Representatives	State District	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Frank A LoBiondo	5-9-00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	VINELAND BOARD OF EDUCATION	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 1999	$500
N/A			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X										X									P, S, E
	SP Simon & Schuster			Indefinite																Royalties									X				P
	1st Bank of Paducah, KY accounts						X									X									X								
	12 ACRES WOODED LAND UPPER DEERFIELD TWP., NJ					X															X												
	LoBIONDO BROTHERS MOTOR EXPRESS INC COMMON STOCK						X														X												
	SOUTHERN JERSEY BANCORP OF DELAWARE COMMON STOCK	X												X								X											E
	S & L PETROLEUM, INC. COMMON STOCK				X																X												
	NEW YORK LIFE INSURANCE POLICY			X																	X												
	FIRST UNION CAPITAL MGMT GROUP MONEY MARKET ACCT		X											X								X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name FRANK A. LoBIONDO

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	FIRST UNION CAPITAL MGMT: NJ STATE EDL-B BONDS	A X	INTEREST X	III X	S
	FIRST UNION CAPITAL MGMT: S&P 500 DEPOSITARY RECP I	A X	DIVIDENDS X	II X	S
	FIRST UNION CAPITAL MGMT: NJ STATE GENL OB BONDS	C X	INTEREST X	II X	P
	FIRST UNION CAPITAL MGMT: PUERTO RICO INFRA BONDS	C X	INTEREST X	II X	P
	MINOTOLA NATIONAL BANK ACCOUNT	C X	INTEREST X	IV X	
	FARMERS & MERCHANTS NATL BANK ACCOUNT (NOW HUDSON UNITED BANK-MERGER)	D X	INTEREST X	III X	
	FRANKLIN GROWTH CLASS I IRA ACCOUNT	D X	DIVIDENDS X; CAPITAL GAINS X	III X	
SP	MUTUAL OF AMERICA IRA ACCT	C X	DIVIDENDS X	II X	
SP	SUMMIT BANK IRA ACCOUNT	C X	INTEREST X	II X	
	FIRST UNION CAPITAL MGMT GROUP IRA ACCOUNT	D X	DIVIDENDS X; INTEREST X	III X	
	HUDSON UNITED BANK COMMON STOCK	F X		I X	E

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name FRANK A. LoBIONDO

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	LoBIONDO BROTHERS MOTOR EXPRESS 401(k) PROFIT SHARING PLAN-AMERICAN FUND GROUP (Invested in Washington Mutual Investors Fund; Self-directed)							X						X		X											X					

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Name FRANK A. LoBIONDO

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	FIRST UNION CAPITAL MANAGEMENT GROUP: NJ STATE EDL-B BONDS		X		01-04-99	X									
	FIRST UNION CAPITAL MANAGEMENT GROUP: S & P 500 DEPOSITARY RECP UNIT SERIES I		X		01-04-99	X									
	FIRST UNION CAPITAL MANAGEMENT GROUP: NJ STATE GENERAL OBLIGATION BONDS	X			01-04-99	X									
	FIRST UNION CAPITAL MANAGEMENT GROUP: PUERTO RICO INFRASTRUCTURE BONDS	X			01-04-99	X									
	SOUTHERN JERSEY BANCORP OF DELAWARE COMMON STK EXCHANGED IN MERGER - HUDSON UNITED BANK			X	11-30-99				X						

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
N/A							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
TRUSTEE	VINELAND YOUNG MEN'S CHRISTIAN ASSOCIATION

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
10-14-96	LoBIONDO BROTHERS MOTOR EXPRESS, INC.	CONTINUING INTEREST IN COMPANY 401(k) PROFIT SHARING PLAN (SELF-DIRECTED)

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

00 MAY 15 PM 12:07

NITA M. LOWEY
(Full Name)

2421 RAYBURN HOUSE OFFICE BUILDING
(Mailing Address)

WASHINGTON DC 20515

Daytime Telephone: 202-225-6506

MC HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State NY District 18	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes	X	No		
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes		No	X	
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes	X	No		
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes	X	No		
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes	X	No		
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes		No	X	
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes	X	No		
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes		No	X	
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes		No	X	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes		No	X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes		No	X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Nita Lowey	5/15/00

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Lowey Dannenberg Bemporad & Selinger, P.C.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash , D C	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$ 500
NONE				

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	IRA - The Kaufmann Fund	$500,001 - $1,000,000	NA	None	NA
	IRA - Smith Barney	$15,001 - $50,000	NA	None	NA
	US Gov't Thrift Savings Plan	$15,001 - $50,000	NA	None	NA
SP	IRA - Tweedy Browne	$250,001 - $500,000	NA	None	NA
	NYS Retirement Plan	$50,001 - $100,000	Retirement plan payments	$2,501 - $5,000	After age 62 eligible to receive payments
	NYS Def. Comp. Plan	$50,001 - $100,000	NA	None	NA

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	MD Sass Reenterprise Fund	$500,001 - $1,000,000	Capital Gains	$50,001 - $100,000	NA
JT	MD Sass Muni/Treasury Fund	$500,001 - $1,000,000	Interest/Capital Gains	$15,001 - $50,000	NA
JT	MD Sass Symphony Fund	$500,001 - $1,000,000	Interest/Capital Gains	$15,001 - $50,000	NA
SP	Ingalls & Snyder Value Pp.	$500,001 - $1,000,000	Interest/Capital Gains	$15,001 - $50,000	NA
JT	EGS Partners	$1,000,001 - $5,000,000	Dividends/Capital Gains	$50,001 - $100,000	NA
SP	P. Oppenheimer Inv. Pp.	$500,001 - $1,000,000	Dividends/Capital Gains	$15,001 - $50,000	NA
SP	Oppenheimer/Spence Pp.	$250,001 - $500,000	Dividends/Capital Gains	$2,501 - $5,000	NA
	Bear Stearns Portfolio of NY Tax-Free Bonds (attached)	$500,001 - $1,000,000	Interest	$50,001 - $100,000	NA
JT	Lebenthal Portfolio of NY Tax-Free Bonds (attached)	$1,000,001 - $5,000,000	Interest	$50,001 - $100,000	NA
JT	Lebenthal NY Muni Bond Fund	$250,001 - $500,000	Interest	$5,001 - $15,000	NA
SP	Santa Monica Partners	$250,001 - $500,000	Capital Gains	$15,001 - $50,000	NA
	Lowey Family Investment	$500,001 - $1,000,000	Capital Gains	$50,001 - $100,000	NA
SP	Lowey Family Investment	$500,001 - $1,000,000	Capital Gains	$50,001 - $100,000	NA
JT	Spear Leeds/Brownstone Gp	$500,001 - $1,000,000	Interest	$15,001 - $50,000	P
JT	Citibank N A.	$50,001 - $100,000	Interest	$1,001 - $2,500	NA
JT	Chase Bank	$1,001 - $15,000	Interest	$201 - $1,000	NA
JT	Citibank Landmark Fund	$250,001 - $500,000	Dividends	$15,001 - $50,000	NA
SP	Lowey Dannenberg Bemporad & Selinger	$1,000,001 - $5,000,000	Interest in law firm	None	NA

LEBENTHAL
120 Broadway
New York, NY 10271-0005
(212) 425-6116

YOUR BROKERAGE ACCOUNT STATEMENT

Statement Period: November 27, 1999
through: December 31, 1999
Account Number: 4ED-795825
Soc. Sec. Number: 122-24-7677
Phone Number: (914) 967-7742

Statement for the account of:

STEPHEN LOWEY AND
NITA M. LOWEY JTWROS
105 BEVERLY ROAD
RYE NY 10580-1902

Your Account Executive:

James A. Lebenthal
Lebenthal & Co., Inc
120 Broadway 12th FL.
New York NY 10271-0005
(212) 748-5555
ID : 243

ASSET VALUATION

	This Period Value	This Period % of Assets	Last Period Value	Last Period % of Assets
Money Market Funds	10,655.44	.63	9,380.44	.56
Municipal Bonds	1,381,686.75	81.89	1,393,696.75	82.63
Mutual Funds	279,632.15	16.57	283,551.43	16.81
Total Brokerage Account Assets	**$1,671,974.34**	**99.10**	**$1,686,628.62**	**100.00**
Income/Securities Not Yet Received	15,246.88	.90	.00	.00
Total Assets	**$1,687,221.22**	**100.00**	**$1,686,628.62**	**100.00**

ACTIVITY SUMMARY

	Debits	Credits
Opening Balance		**$.00**
Sec. Withdrawals/Deposits	1,274.72-	.00
Dividends and Interest	.00	2,549.72
Money Market Funds	1,275.00-	.00
Closing Balance		**$.00**

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MESSAGES

PLEASE NOTE, IF YOU OWNED SHARES OF ANY MONEY MARKET MUTUAL FUND(S) LINKED TO YOUR BROKERAGE ACCOUNT IN 1999, DIVIDENDS EARNED ON THESE FUNDS IN THE MONTH OF DECEMBER 1999 MAY NOT BE REFLECTED ON THIS STATEMENT. THESE DIVIDENDS WILL BE POSTED ON YOUR JANUARY 2000 STATEMENT. SINCE THE FUND MANAGER IS REQUIRED TO REPORT TO THE IRS THE TOTAL DIVIDENDS EARNED ON YOUR MONEY FUND SHARES DURING 1999, YOU SHOULD RECEIVE A 1099-DIV DIRECTLY FROM THE FUND MANAGER. DIVIDENDS EARNED IN A RETIREMENT ACCOUNT ARE TAX-DEFERRED AND A 1099-DIV WILL NOT BE ISSUED.

TIRED OF THE ENDLESS SEARCH FOR COST BASIS INFORMATION EACH TAX SEASON? OPEN A WORKHORSE PLUS ACCOUNT TODAY AND YOUR COST BASIS WILL BE REPORTED ON EVERY MONTHLY STATEMENT. FOR DETAILS ON COST BASIS, AS WELL AS ALL THE OTHER BENEFITS THAT WORKHORSE PLUS PROVIDES, CALL YOUR LEBENTHAL & CO. PERSONAL

YOUR ACCOUNT IS PROTECTED UP TO THE TOTAL AMOUNT HELD IN THE ACCOUNT. SEE FOLLOWING PAGE(S) FOR IMPORTANT INFORMATION.

Clearing Through Pershing Division of Donaldson, Lufkin & Jenrette Securities Corporation One Pershing Plaza Jersey City, N.J. 07399 B00010095

MESSAGES *(continued)*

ACCOUNT EXECUTIVE TODAY.

TRANSACTIONS BY TYPE OF ACTIVITY

Withdrawals and Deposit of Securities

Process Date	Transaction Date	Activity Type	Description	Quantity	Debit Amount	Credit Amount
12/14/99		REINVEST CASH INCOME	LEBENTHAL NEW YORK MUNICIPAL BOND FUND SHRS PURCH. AT $7.64000 FOR ACCRUAL PERIOD ENDING 12/10/99	166.84800	1,274.72-	
Total Withdrawals and Deposit of Securities					**$1,274.72-**	**$.00**

Dividends and Interest

Process Date	Transaction Date	Activity Type	Description	Debit Amount	Credit Amount
12/14/99		NON-TAXABLE DISTRIBUTION RECEIVED	LEBENTHAL NEW YORK MUNICIPAL BOND FUND FOR ACCRUAL PERIOD ENDING 12/10/99		1,274.72
12/15/99		BOND INTEREST RECEIVED	50000 NEW YORK ST ENVIRONMENTAL FACS CORP POLLUTN CTL REV ST WTR SER B LT 5.100% 12/15/08 B/E DTD 03/01/97 CLB RD 11/30 PD 12/15/99		1,275.00
Total Dividends and Interest				**$.00**	**$2,549.72**

Money Market Funds Activity

Process Date	Transaction Date	Activity Type	Description	Debit Amount	Credit Amount
12/16/99		MONEY FUND PURCHASE	ALLIANCE MUNI TR NY	1,275.00-	
Total Money Market Funds Activity				**$1,275.00-**	**$.00**

Total Value of all Transactions	**$2,549.72-**	**$2,549.72**

PORTFOLIO HOLDINGS

Municipal Bonds *(in alphabetical sequence)*

Quantity	Description	Price/Factor	Market Value	Accrued Interest	Estimated Yield	Annual Income	Security ID	Account Type	Location
75,000	LONG ISLAND PWR AUTH N Y ELEC SYS REV GEN 4.800% 04/01/16 B/E DTD 10/15/98 CALLABLE 04/01/08 @ 101.000 CALLABLE 04/01/10 @ 100.000 MBIA INSURED 1ST CPN DTE 04/01/99 CPN PMT SEMI ANNUAL ON APR 01 AND OCT 01 MOODY RATING AAA S & P RATING AAA	89.850	67,387.50	900.00	5.340%	3,600.00	542690JS2	CASH	
25,000	MUNICIPAL ASSISTANCE CORP FOR CITY NEW YORK N Y SER J 5.125% 07/01/05 B/E DTD 04/15/97 1ST CPN DTE 01/01/98 CPN PMT SEMI ANNUAL ON JAN 01 AND JUL 01 MOODY RATING AA2 S & P RATING AA	101.411	25,352.75	640.63	5.050%	1,281.25	626190V33	CASH	
100,000	NASSAU COUNTY N.Y. SERIES N 6.125% 10/15/09 B/E DTD 10/29/92 PREREFUNDED 10/15/02 @ 103.000 AMBAC INSURED 1ST CPN DTE 04/15/93 CPN PMT SEMI ANNUAL ON APR 15 AND OCT 15 MOODY RATING AAA S & P RATING AAA	105.814	105,814.00	1,293.06	5.780%	6,125.00	6316544V9	CASH	
100,000	NEW YORK CITY SER A 6.000% 08/01/06 B/E DTD 07/11/96 1ST CPN DTE 02/01/97 CPN PMT SEMI ANNUAL ON FEB 01 AND AUG 01 MOODY RATING A3 S & P RATING A-	104.692	104,692.00	2,500.00	5.730%	6,000.00	6496646D6	CASH	
50,000	NEW YORK N Y SER J UT 5.250% 05/15/14 B/E DTD 06/15/99 CALLABLE 05/15/09 @ 101.000 CALLABLE 05/15/11 @ 100.000 MBIA INSURED 1ST CPN DTE 11/15/99 CPN PMT SEMI ANNUAL ON MAY 15 AND NOV 15 MOODY RATING AAA S & P RATING AAA	96.092	48,046.00	335.42	5.460%	2,625.00	649669Y44	CASH	

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PORTFOLIO HOLDINGS *(continued)*

Municipal Bonds *(in alphabetical sequence, continued)*

Quantity	Description	Price/Factor	Market Value	Accrued Interest	Estimated Yield	Annual Income	Security ID	Account Type	Location
50,000	NEW YORK STATE CROSSOVER REFUNDING 5.800% 11/15/03 B/E DTD 07/15/92 CALLABLE 11/15/02 @ 101.000 1ST CPN DTE 11/15/92 CPN PMT SEMI ANNUAL ON MAY 15 AND NOV 15 MOODY RATING A2 S & P RATING A+	103.850	51,925.00	370.56	5.580%	2,900.00	6497853A8	CASH	
100,000	NEW YORK ST DORM AUTH REVS CITY UNIV-3RD GEN RES-SER 2 6.400% 07/01/07 B/E DTD 11/15/94 PREREFUNDED 07/01/04 @ 102.000 MBIA INSURED 1ST CPN DTE 07/01/95 CPN PMT SEMI ANNUAL ON JAN 01 AND JUL 01 MOODY RATING AAA S & P RATING AAA	108.322	108,322.00	3,200.00	5.900%	6,400.00	6498346G8	CASH	
50,000	NEW YORK ST ENVIRONMENTAL FACS CORP POLLUTN CTL REV ST WTR SER B LT 5.100% 12/15/08 B/E DTD 03/01/97 CALLABLE 12/15/07 @ 102.000 1ST CPN DTE 06/15/97 CPN PMT SEMI ANNUAL ON JUN 15 AND DEC 15 MOODY RATING AAA S & P RATING AAA	99.713	49,856.50	113.33	5.110%	2,550.00	649850Q72	CASH	
75,000	NEW YORK ST MED CARE FACS FIN AGY REV N Y DOWNTOWN HOSP SER A 6.500% 08/15/05 B/E DTD 03/01/95 PREREFUNDED 02/15/05 @ 102.000 1ST CPN DTE 08/15/95 CPN PMT SEMI ANNUAL ON FEB 15 AND AUG 15 MOODY RATING AAA S & P RATING AAA	109.300	81,975.00	1,841.67	5.940%	4,875.00	64988KGG6	CASH	
250,000	N Y ST MED CARE FACS FIN AGY REV MENTAL HLTH SVCS FACS-SER D 5.400% 02/15/08 B/E DTD 07/01/95 CALLABLE 08/15/05 @ 102.000 CALLABLE 08/15/07 @ 100.000 MBIA INSURED 1ST CPN DTE 02/15/96 CPN PMT SEMI ANNUAL ON FEB 15 AND AUG 15 MOODY RATING AAA S & P RATING AAA	101.947	254,867.50	5,100.00	5.290%	13,500.00	64988KUA3	CASH	

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PORTFOLIO HOLDINGS *(continued)*

Municipal Bonds *(in alphabetical sequence, continued)*

Quantity	Description	Price/Factor	Market Value	Accrued Interest	Estimated Yield	Annual Income	Security ID	Account Type	Location
150,000	NEW YORK ST URBAN DEV CORP REV CORRECTIONAL CAPITAL FACILITIES SERIES 5 6.000% 01/01/09 B/E DTD 08/01/95 PREREFUNDED 01/01/05 @ 102.000 1ST CPN DTE 01/01/96 CPN PMT SEMI ANNUAL ON JAN 01 AND JUL 01 MOODY RATING BAA1 S & P RATING A-	106.997	160,495.50	4,500.00	5.600%	9,000.00	650033W90	CASH	
25,000	TRIBOROUGH BRDG & TUNL AUTH N Y SPL OBLIG RFDG SER A 5.250% 01/01/13 B/E DTD 07/15/98 CALLABLE 01/01/08 @ 101.000 CALLABLE 01/01/10 @ 100.000 FGIC INSURED 1ST CPN DTE 01/01/99 CPN PMT SEMI ANNUAL ON JAN 01 AND JUL 01 MOODY RATING AAA S & P RATING AAA	98.154	24,538.50	656.25	5.340%	1,312.50	896033MK0	CASH	
50,000	WESTCHESTER CNTY N Y LT 4.700% 11/15/04 B/E DTD 10/31/96 1ST CPN DTE 05/15/97 CPN PMT SEMI ANNUAL ON MAY 15 AND NOV 15 MOODY RATING AAA S & P RATING AAA	100.384	50,192.00	300.28	4.680%	2,350.00	957365Y29	CASH	
250,000	WESTCHESTER CNTY N Y INDL DEV AGY RESOURCE RECOVERY REV SUBJ TO AMT 5.000% 07/01/05 B/E DTD 12/26/96 AMBAC INSURED 1ST CPN DTE 07/01/97 CPN PMT SEMI ANNUAL ON JAN 01 AND JUL 01 MOODY RATING AAA S & P RATING AAA	99.289	248,222.50	6,250.00	5.030%	12,500.00	957375BJ6	CASH	
Total Municipal Bonds			**$1,381,686.75**	**$28,001.20**		**$75,018.75**			

Mutual Funds

Quantity	Description	Price	Market Value	Div/Cap Gain Option	Estimated Yield	Annual Income	Security ID	Account Type	Location
37,135.74400	LEBENTHAL NEW YORK MUNICIPAL BOND FUND	7.530	279,632.15	REINVEST	5.400%	15,114.24	LENYX	CASH	

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PORTFOLIO HOLDINGS *(continued)*

Mutual Funds *(continued)*

Quantity	Description	Price	Market Value	Div/Cap Gain Option	Estimated Yield	Annual Income	Security ID	Account Type	Location
Total Mutual Funds			**$279,632.15**			**$15,114.24**			

	Market Value	Accrued Interest	Annual Income
Total -- All Securities	**$1,661,318.90**	**$28,001.20**	**$90,132.99**

Disclosures and Other Information

Pricing - Securities prices may vary from actual liquidation value. Prices shown should only be used as a general guide to portfolio value. Prices are received from various pricing services. However, pricing services are sometimes unable to provide timely information. Where pricing sources are not readily available, particularly on certain debt securities, estimated prices may be generated by a matrix system taking various factors into consideration. The pricing of listed options takes into account the last closing price, as well as the current bid and offer prices. Where securities have not been priced, such securities have not been included in the Asset Valuation information at the beginning of this statement

Reinvestment - The dollar amount of Mutual Fund distributions, Money Market Fund income, or dividends on other securities shown on your statement may have been reinvested into additional shares. You will not receive confirmations for these reinvestment transactions. However, information pertaining to these transactions which would otherwise appear on confirmations, including the time of execution and the name of the person from whom your security was purchased, will be furnished to you upon written request to your introducing firm. In dividend reinvestment transactions, Pershing acts as your agent and receives payment for order flow, the source and nature of which payment will be furnished to you upon written request to your introducing firm.

MONEY MARKET FUND SUMMARY

Fund Name	Account Number	Activity Ending	Opening Balance	Closing Balance	Accrued Income	Income This Year	Current Yield	30-Day Yield
ALLIANCE MUNI TR NY PORT	0004940991	12/31/99	9,380.44	10,655.44	35.20	480.17	3.550	2.840
Total Money Market Fund Holdings			**$9,380.44**	**$10,655.44**	**$35.20**	**$480.17**		

MONEY MARKET FUND DETAIL

Alliance Muni Tr NY Port **Account Number : 0004940991** **Activity Ending : 12/31/99**

Date	Activity Type	Description	Debit Amount	Credit Amount	Share Balance
11/27/99	OPENING BALANCE				9,380.44

MONEY MARKET FUND DETAIL *(continued)*

Alliance Muni Tr NY Port **Account Number : 0004940991** **Activity Ending : 12/31/99**

Date	*Activity Type*	*Description*	*Debit Amount*	*Credit Amount*	*Share Balance*
12/16/99	DEPOSIT	SHARES PURCHASED BY WIRE		1,275.00	10,655.44
12/31/99	CLOSING BALANCE				10,655.44
Total Closing Balance - All Money Market Funds					**$10,655.44**

DIVIDEND, INTEREST AND DISTRIBUTION SUMMARY

	This Period		*This Year*	
	Taxable	*Non Taxable*	*Taxable*	*Non Taxable*
Municipal Bond Interest	.00	1,275.00	.00	72,035.01
Mutual Fund Dividends - Current Year	.00	1,274.72	.00	14,762.00
Money Fund Income	.00	.00	.00	480.17
Total Dividends and Interest	**$.00**	**$2,549.72**	**$.00**	**$87,277.18**

INCOME/SECURITIES NOT YET RECEIVED

Cash Dividends, Interest and Distributions

Security	*Type*	*Record Date*	*Payable Date*	*Quantity Held*	*Rate*	*Amount of Payment*
MUNICIPAL ASSISTANCE CORP FOR CITY NEW YORK N Y SER J	INTEREST	12/17/99	01/01/00	25,000	.025625	640.63
NEW YORK ST DORM AUTH REVS CITY UNIV-3RD GEN RES-SER 2	INTEREST	12/15/99	01/01/00	100,000	.032000	3,200.00
NEW YORK ST URBAN DEV CORP REV CORRECTIONAL CAPITAL	INTEREST	12/17/99	01/01/00	150,000	.030000	4,500.00
TRIBOROUGH BRDG & TUNL AUTH N Y SPL OBLIG RFDG SER A	INTEREST	12/15/99	01/01/00	25,000	.026250	656.25

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INCOME/SECURITIES NOT YET RECEIVED *(continued)*

Cash Dividends, Interest and Distributions *(continued)*

Security	Type	Record Date	Payable Date	Quantity Held	Rate	Amount of Payment
WESTCHESTER CNTY N Y INDL DEV AGY RESOURCE RECOVERY	INTEREST	12/15/99	01/01/00	250,000	.025000	6,250.00
Total Payment						**$15,246.88**
Total Value of Unpaid Items						**$15,246.88**

The above information has been obtained from sources we believe to be reliable. All items are subject to receipt. We make no representation as to accuracy or completeness

ACCRUED INTEREST SUMMARY *(Interest Paid and Received on Purchase and Sale of Fixed Income Securities)*

	Current Period		This Year	
	Taxable	Non Taxable	Taxable	Non Taxable
Municipal Bond Accrued Interest Paid	.00	.00	.00	298.96-
Total Accrued Interest Paid	**$.00**	**$.00**	**$.00**	**$298.96-**

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TERMS AND CONDITIONS

GENERAL INFORMATION

1. All orders and transactions shall be solely for your account and risk shall be subject to the constitution, rules, regulations, customs, usages, rulings and interpretations of the exchange or market and the clearing facility, if any, where the transactions are executed and/or settled, or if applicable, of the National Association of Securities Dealers, Inc., and to all applicable laws and regulations
2. Whenever you are indebted to the Pershing Division of Donaldson, Lufkin & Jenrette Securities Corporation (Pershing) for any amount, all securities held by it for you in any account in which you have any interest shall secure all your liabilities to Pershing, and Pershing may in its discretion at any time, without tender, demand or notice to you, close or reduce any or all of your accounts by public or private sale or purchase or both of all or any securities carried in such accounts, any balance remaining due Pershing to be promptly paid by you.
3. Whenever you are indebted to Pershing for any amount, all securities carried for your account are or may be, without further notice to you, loaned or pledged by Pershing, either separately or under circumstances which will permit the commingling thereof, with other securities for any amount less than, equal to or greater than your liabilities to Pershing, but not under circumstances for an amount prohibited by law
4. Title to securities sold to you, where Pershing has acted as principal, shall remain with Pershing until the entire purchase price is received or until the settlement date, whichever is later.
5. Any free credit balance carried for your account represents funds payable upon demand which, although properly accounted for on Pershing's books of record, are not segregated and may be used in the conduct of its business.
6. You may have received confirmations for transactions which do not appear on your statement. If so, the transactions will appear on your next periodic statement. Such transactions must be considered by you when computing the value of your account. This is especially true if you have written options which have been exercised.
7. If you maintain a margin account, this is a combined statement of your general account and a special memorandum account maintained for you under Regulation T of the Board of Governors of the Federal Reserve System. The permanent record of the separate account as required by Regulation T is available for your inspection upon request.
8. Interest charged on debit balances in your account appears on the statement. The rate of interest and period covered are indicated. The rate may change from time to time due to fluctuations in money rates or other reasons. Interest is computed as described in material previously furnished to you. Please contact your financial institution if you desire additional copies.
9. A financial statement of Donaldson, Lufkin & Jenrette Securities Corporation is available for your inspection at Pershing's offices. A copy of it will be mailed upon your written request.
10. This statement should be retained for your records.
11. Dividends, interest and other distributions shown on this statement were classified as taxable or nontaxable based on certain information known as of the distribution date. This classification is subject to change and is solely intended for use as general information.

    After year end, Pershing is required to provide tax information to the Internal Revenue Service and other governmental authorities. At that time Pershing will provide that information on the annual tax information statement to you, use that statement to prepare your tax filings. The tax statement also includes other useful information to assist in accumulating the data to prepare your tax returns.
12. **Pershing does not provide tax, investment or legal advisory services and no one associated with Pershing is authorized to render such advice. Do not rely upon any such advice, if given. Investors are encouraged to consult their tax advisors to determine the appropriate tax treatment of their business.**
13. Securities held in custody by Pershing for your account are protected up to the total amount held in the account. Of this total, Securities Investor Protection Corporation (SIPC) provides $500,000 of coverage, including $100,000 for claims for cash. The remaining coverage on securities only is provided by Pershing through a commercial insurer. The account protection applies when a SIPC member firm fails financially and is unable to meet obligations to securities customers, but does not protect against losses from the rise and fall in market value of investments.
14. Pershing trades for its own account as a market maker, specialist, odd lot dealer, block positioner, arbitrageur and/or investor. Consequently, at the time of any transaction you may make, Pershing may have a position in such securities, which position may be partially or completely hedged.
15. If average price transaction is indicated on the front of this statement your financial institution or Pershing may have acted as principal, agent or both. Details available upon request.
16. This statement will be deemed conclusive and an account stated unless you advise Pershing in writing of any objection to it within ten days after receipt. Any such objection should be sent to Pershing at One Pershing Plaza, Jersey City, New Jersey 07399, Attention: Compliance Department.

ERRORS AND OMISSIONS EXCEPTED

PORTFOLIO HOLDINGS

This section includes the net market value of the securities in your account on a settlement date basis, including short positions, at the close of the statement period. The market prices have been obtained from quotation services which we believe to be reliable, however, we cannot guarantee their accuracy. Securities for which a price is not available are marked "N/A" and are omitted from the Total.

The Annual Income, which is an estimated figure, is the current interest or most recently declared dividend for each security and is annualized. This figure particularly on equity mutual funds can vary substantially from one year to the next. As a result, actual amounts distributed may be more or less than those estimated on this statement. The Annual Income is then divided by the current Market Value to give the Estimated Yield which too could vary substantially because the income is estimated and it does not take account of your holding period. Annual income has been obtained from sources believed to be reliable, but no assurance can be made as to accuracy.

Accrued Interest represents interest earned but not yet received.

LOCATION CODES:

TF - Security in transfer
LT - Required documents received, shares submitted to transfer agent
SX - Security held at Pershing in client name
PP - Additional documents required for submission of shares to transfer agent
C - Security subject to Annual Special Products charge

THE ROLE OF PERSHING

Pershing carries your account as clearing broker pursuant to a clearing agreement with your financial institution. Pershing may accept from your financial institution without inquiry or investigation (i) orders for the purchase and sale of securities and other property and (ii) any other instructions concerning your account. Pershing is not responsible or liable for any acts or omissions of your financial institution or its employees and it does not supervise them. Pershing provides no investment advice nor does it assess the suitability of any transaction or order. Pershing acts as the agent of your financial institution and you agree that you will not hold Pershing or any person controlling or under common control with it liable for any investment losses incurred by you.

Pershing performs several key functions at the direction of your financial institution. It acts as custodian for funds and securities you may deposit with it directly or through your financial institution or that it receives as the result of securities transactions it processes. Inquiries concerning the positions and balances in your account may only be directed to the Pershing Customer Service Department at 201-413-3333. All other inquiries regarding your account or activity should be directed to your financial institution. For a description of other functions performed by Pershing please consult the Disclosure Statement provided to you upon the opening of your account.

Your financial institution is responsible for adherence to the securities laws, regulations and rules which apply to it regarding its own operations and the supervision of your account, its sales representatives and other personnel. Your financial institution is also responsible for approving the opening of accounts and obtaining account documents, the acceptance and, in certain instances, execution of securities orders, the assessment of the suitability of those transactions, where applicable, the rendering of investment advice, if any, to you and in general, for the ongoing relationship that it has with you.

This notice is not meant as a definitive enumeration of every possible circumstance, but as a general disclosure.

If you have any questions regarding this notice or if you would like additional copies of the Disclosure Statement, please contact your financial institution.

PAYMENT FOR ORDER FLOW PRACTICES

Pershing and its affiliate, Pershing Trading Company, L.P. (collectively Pershing), receive compensation for directing over-the-counter (OTC) equity order flow to selected market makers. Pershing also directs a percentage of listed equity flow to certain exchanges or specialists and receives compensation in connection with the routing of such orders.

With respect to OTC transactions, compensation may be in the form of a per share cash payment or non-cash compensation in the form of reciprocal arrangements whereby, in exchange for having orders directed to them, other broker-dealers will direct certain orders to Pershing. Similar reciprocal arrangements exist with respect to listed equities, whereby other broker-dealers will direct orders to Pershing specialists on the floor of various exchanges in return for receiving orders from Pershing. Additionally, certain exchanges reduce or eliminate execution fees on orders directed to them in dually listed securities.

Pershing has selected certain market makers to provide execution of OTC securities transactions who have agreed to accept orders transmitted electronically up to a specified size and to execute them at or better than the national best bid or offer (NBBO). On larger orders, or if the designated market makers do not make a market in the subject security, Pershing directly contacts market makers to obtain an execution. The designated market makers to whom orders are automatically routed are selected based on the consistently high quality of their OTC executions in one or more market segments and their ability to provide opportunities for executions at prices superior to the NBBO.

If an order for an exchange-listed security is not immediately executable on the exchange to which it is routed, such order may be represented in the national marketplace using the various means available for price discovery.

Pershing also regularly reviews reports for quality of execution purposes.

ARBITRATION

ARBITRATION DISCLOSURES:

- ARBITRATION IS FINAL AND BINDING ON THE PARTIES.
- THE PARTIES ARE WAIVING THEIR RIGHT TO SEEK REMEDIES IN COURT, INCLUDING THE RIGHT TO JURY TRIAL.
- PRE ARBITRATION DISCOVERY IS GENERALLY MORE LIMITED THAN AND DIFFERENT FROM COURT PROCEEDINGS.
- THE ARBITRATORS' AWARD IS NOT REQUIRED TO INCLUDE FACTUAL FINDINGS OR LEGAL REASONING AND ANY PARTY'S RIGHT TO APPEAL OR TO SEEK MODIFICATION OF RULINGS BY THE ARBITRATORS IS STRICTLY LIMITED.
- THE PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE A MINORITY OF ARBITRATORS WHO WERE OR ARE AFFILIATED WITH THE SECURITIES INDUSTRY.

ARBITRATION AGREEMENT

ANY CONTROVERSY BETWEEN YOU AND US SHALL BE SUBMITTED TO ARBITRATION BEFORE THE NEW YORK STOCK EXCHANGE, INC., ANY OTHER NATIONAL SECURITIES EXCHANGE ON WHICH A TRANSACTION GIVING RISE TO THE CLAIM TOOK PLACE (AND ONLY BEFORE SUCH EXCHANGE), OR THE NATIONAL ASSOCIATION OF SECURITIES DEALERS, INC.

NO PERSON SHALL BRING A PUTATIVE OR CERTIFIED CLASS ACTION TO ARBITRATION, NOR SEEK TO ENFORCE ANY PRE-DISPUTE ARBITRATION AGREEMENT AGAINST ANY PERSON WHO HAS INITIATED IN COURT A PUTATIVE CLASS ACTION; WHO IS A MEMBER OF A PUTATIVE CLASS WHO HAS NOT OPTED OUT OF THE CLASS WITH RESPECT TO ANY CLAIMS ENCOMPASSED BY THE PUTATIVE CLASS ACTION UNTIL: (I) THE CLASS CERTIFICATION IS DENIED; (II) THE CLASS IS DECERTIFIED; OR (III) THE CUSTOMER IS EXCLUDED FROM THE CLASS BY THE COURT. SUCH FORBEARANCE TO ENFORCE AN AGREEMENT TO ARBITRATE SHALL NOT CONSTITUTE A WAIVER OF ANY RIGHTS UNDER THIS AGREEMENT EXCEPT TO THE EXTENT STATED HEREIN.

THE LAWS OF THE STATE OF NEW YORK GOVERN

If any of the above Terms and Conditions are unacceptable to you, please notify Pershing immediately in writing by certified mail to Pershing at One Pershing Plaza, Jersey City, New Jersey 07399, Attention: Compliance Department.

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BEAR STEARNS

OFFICE SERVICING YOUR ACCOUNT
Bear, Stearns & Co. Inc.
245 Park Avenue
New York, New York 10167
(212) 272-2000

CLEARED THROUGH ITS
WHOLLY OWNED SUBSIDIARY

Bear Stearns Securities Corp
One Metrotech Center North
Brooklyn, New York 11201-3859
(212) 272-1000

NITA LOWEY

ACCOUNT EXECUTIVE GREENBERG,GREENBERG
ELECTRONIC ADDRESS www.bearstearns.com

STATEMENT PERIOD November 27, 1999
THROUGH December 31, 1999

ACCOUNT NUMBER 042-44287 MR3
TAXPAYER NUMBER 017-30-2729
LAST STATEMENT November 26, 1999

What's In This Statement

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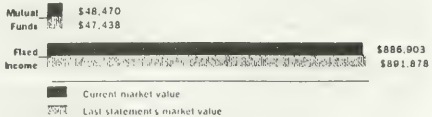
NITA LOWEY
105 BEVERLY ROAD
RYE NY 10580-1902

Your Portfolio at a Glance

TOTAL VALUE OF SECURITIES THIS PERIOD	935,373
LONG ACCRUED INTEREST	16,698
NET EQUITY THIS PERIOD	$952,071
NET EQUITY LAST STATEMENT	953,869
CHANGE SINCE LAST STATEMENT	1,798

There are no "Stop Loss" orders or other pending buy or sell open orders on file for your account.

Market Value of Your Portfolio



Important Message

If any information regarding 1999 interest, dividends, miscellaneous income, gross proceeds or original issue discount is required to be reported to the IRS for this account, a Consolidated Form 1099 will be mailed to you by January 31, 2000 or 1042S by March 15, 2000.

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Please report any difference or non-receipt of checks or stocks indicated as delivered to you, to Client Services at 800-634-1428 or write to Client Services at Bear Stearns Securities Corp One Metrotech Center North Brooklyn, N.Y. 11201-3859

SIPC This summary is for informational purposes only. It is not intended as a tax document. This statement should be retained for your records. See reverse side for important information.

CLEARED THROUGH ITS
WHOLLY OWNED SUBSIDIARY

Bear, Stearns Securities Corp
One Metrotech Center North
Brooklyn, New York 11201-3859
(212) 272-1000

NITA LOWEY

GUIDE TO YOUR STATEMENT

Your statement may contain the following sections

Your Portfolio at a Glance: Reflects the net equity of your account at the close of the statement period, the net equity of your last statement and any change since the last statement

Market Value of Your Portfolio: A graph reflecting the change in the market value of your account portfolio from the market value reflected on your last statement (Cash/Cash Equivalent, Equities, Mutual Funds, Fixed Income, Other)

Cash Flow Analysis and Cash Balance Summary: Both show your opening and closing balances. Cash Flow Analysis reflects the categories of cash activity. Cash Balance Summary reflects the cash balances by account type. *Opening Balance* is the credit or debit carried over from the previous period's closing balance. *Closing balance* is the combination of the total debits and credits for the statement period together with the opening cash balance. A debit balance (money you owe us) is indicated by a minus sign in these sections

Income Summary: Reflects the total dividend, interest and other income amounts for the statement period and year to date. Any tax withheld, margin interest and miscellaneous charges are included here if applicable

Distribution Summary: Reflects returns on capital liquidations, and other income for the statement period and current year

Retirement Plan: Reflects the contributions received and distributions paid during this statement period as well as for the previous year

Your Portfolio Allocation A pie chart defining your asset allocations (Cash/Cash Equivalent, Equities, Mutual Funds, Fixed Income, Other)

Portfolio Composition: Reflects a summary of cash/cash equivalent, equities, mutual funds, and fixed income for the statement period

Bonds with 60 – Day Horizon: Reflects bonds that will mature or are subject to redemption within the next 60 days

Your Portfolio Holdings: Reflects cash and all securities in your account. Estimated annual income is based on the dividend or income expected to be received annually. Accrued interest represents interest earned but not yet paid or collected on fixed income securities since the last coupon date. There is no guarantee that this interest will be paid by the issuer. Current yield is calculated by dividing the estimated annual income by the market value of the securities and represents an estimated current yield only

Market Prices/Bond Ratings.
Prices for determining market values represent estimates. These estimates are obtained from multiple sources, including Bear, Stearns, its affiliates and outside services. Pricing estimates may be based on bids, prices within the bid/offer spread, closing prices or matrix methodology that uses data relating to other securities whose prices are more ascertainable, to produce a hypothetical price based on the estimated yield spread relationship between securities. Pricing estimates do not constitute a bid for any security. Actual prices realized at sale may be more or less than shown on your statement. Bond ratings are received from outside sources. While we believe our sources for market values and bond ratings to be reliable, we cannot guarantee their accuracy

Transaction Detail: Reflects all transactions settling or processed for your account this statement period

Trades Executed But Not Yet Settled: This section will reflect any trades not yet settled by the statement closing date. The settlement date is indicated in the first column

IMPORTANT NOTES

Dividend Income: Dividends credited to your account may include capital gains, non-taxable dividends and/or dividends on foreign stock. You may wish to consult your tax advisor with regard to your tax liability on these dividend credits

Methods of Computing Interest on Debit Balances:
Interest is charged on a day by day basis for any day that there is a net debit balance in your overall account. The calculation is made on a 360-day basis at the rate or rates shown on the statement. Interest rates may be changed from time to time with fluctuating money market rates or for other reasons.
Customer free credit balances may be used in this firm's business, subject to the limitation of 17CFR Section 240.15c3-3 under the Securities Exchange Act of 1934. You have the right to receive from us in the course of normal business operation, upon demand, the delivery of
a) any free credit balances to which you are entitled
b) any fully-paid securities to which you are entitled
c) any securities purchased on margin upon full payment of any indebtedness to us
If this is a margin account and we maintain a special memorandum account for you, this is a combined statement of your general account and special memorandum account maintained for you under Section 220.6 of Regulation T issued by the Board of Governors of the Federal Reserve System. The permanent record of this separate account, as required by Regulation T, is available for your inspection

For Option Accounts: Further information with respect to commissions and other charges related to the execution of listed options transactions has been included on confirmations of such transactions previously furnished to you and such information will be made available to you promptly upon written request

Bearer Bonds If any securities held by us for your account are bearer obligations which have been issued since December 31, 1982 with original maturities of more than one year, we agree that we will satisfy the conditions set forth in subdivisions (i) (e) and (ii) of Treasury Regulation Section 1.165-12 (c) (3) and covenant that we will comply with the requirements of Treasury Regulation Section 1.165-12(c) (1) (iv) concerning the delivery of such bearer obligations

Financial Statement: A financial statement of our firm is available for your personal inspection at our office or a copy will be mailed to you upon written request

PLEASE PROMPTLY NOTIFY YOUR ACCOUNT EXECUTIVE IN WRITING OF ANY MATERIAL CHANGES IN YOUR FINANCIAL CIRCUMSTANCES OR INVESTMENT OBJECTIVES

Custody: Whether we are your broker or act as a clearing agent for your broker, we carry your account and act as your custodian for funds and securities, once received by us, which have been deposited directly with us through your broker or otherwise or as a result of transactions we process for your account. Inquiries concerning the positions and balances in your account may be directed to our Client Services Department at 212-272-0578. If your account is introduced by another broker, all other inquiries regarding your account and the activity therein should be directed to such broker

Reportable to the Internal Revenue Service: As required by law, at year end, we will report to you and to the Internal Revenue Service and to certain states certain information on sales (including short sales), dividends and various types of interest that have been credited to your account

Statement Frequency: Statements will be mailed to customers who have transactions during the statement period affecting money balances and/or security positions. All other accounts will be sent statements at least four times during a calendar year provided that the account contains a money or security balance

Please promptly notify the office servicing your account in writing of any change of address. The office servicing your account can be found on page 1.

Kindly include your account number(s) on all correspondence

Your securities account will be protected for the account's entire net equity (both cash and securities). The first $500,000 of protection, which includes up to $100,000 of protection for cash, is provided by SIPC (Securities Investor Protection Corporation) and the balance is provided by a separate excess SIPC bond issued by Travelers Casualty & Surety Company covering accounts maintained at Bear, Stearns Securities Corp

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BEAR STEARNS

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NITA LOWEY

STATEMENT PERIOD November 27, 1999
THROUGH December 31, 1999

ACCOUNT NUMBER 042-44287 MR3
TAXPAYER NUMBER 017-30-2729
LAST STATEMENT November 26, 1999

Cash Flow Analysis

	THIS PERIOD
Opening Balance	**$0.00**
Dividends/Interest	2,430.13
Amount Credited	**$2,430.13**
Funds Withdrawn	-2,430.13
Amount Debited	**$-2,430.13**
Closing Balance	**$0.00**

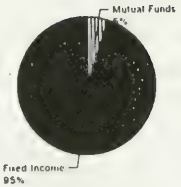
Income Summary

	THIS PERIOD	YEAR TO DATE
Other Dividends	235.13	2,586.43
Muni Bond Int.	2,195.00	42,393.76
Credit Balance Int.	0.00	37.52
Total	**$2,430.13**	**$46,017.71**
Bond Purchase Int.	0.00	-759.03

Portfolio Composition

Mutual Funds	48,470
Fixed Income	886,903
Total	**$935,373**

Your Portfolio Allocation



Unshaded portions denote debit balance and/or short market values. The allocation percentage is derived from the absolute market value of your portfolio.

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STATEMENT PERIOD November 27, 1999
THROUGH December 31, 1999

ACCOUNT NUMBER 042-44287 MRS
TAXPAYER NUMBER 017-30 2729
LAST STATEMENT November 28, 1999

Your Portfolio Holdings

MUTUAL FUNDS

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
BLACKROCK NEW YORK INSURED MUNICIPAL 2008 TERM TRUST INC	BLN	CASH	3,300	14.6880	48,470	2,822	5 8222
TOTAL MUTUAL FUNDS					**$48,470**	**$2,822**	

FIXED INCOME

Municipal Bonds

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ACCRUED INTEREST	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
NEW YORK ST PWR AUTH REV & GEN PURP REF-SER CC -ESC TO MATY- DATED DATE 08/15/93 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 01/01/2000 4.250% JJ 01 RATING: MOODY AA2 S&P AAA	649892G75	CASH	25,000	100.0000	25,000	531	1,063	4 2520
NEW YORK N Y CITY TRAN AU TRAN FACS RV REF LIVINGSTON PLZ PJ DATED DATE 07/01/93 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT FSA INSURED DUE 01/01/2000 4.400% JJ 01 RATING: MOODY AAA S&P AAA	649715BA6	CASH	150,000	100.0000	150,000	3,300	6,600	4.4000
NEW YORK STATE DORM AUTH REVS INSD SKIDMORE COLLEGE DATED DATE 08/15/93 FSA INSURED DUE 07/01/2000 4.400% JJ 01 RATING: MOODY AAA S&P AAA	649834LB2	CASH	35,000	100 1720	35,060	770	1,540	4.3925

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STATEMENT PERIOD November 27, 1999
THROUGH December 31, 1999

ACCOUNT NUMBER 042-44287 MRS
TAXPAYER NUMBER 017-30-2729
LAST STATEMENT November 26, 1999

Your Portfolio Holdings (continued)

Municipal Bonds (continued)

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ACCRUED INTEREST	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
NASSAU CO N Y GEN IMP G/O JER X DATED DATE 11/01/85 MBIA INSURED DUE 11/01/2000 8.000% MN 01 RATING: MOODY AAA S&P AAA	631654PZ7	CASH	25,000	103.0790	25,770	333	2,000	7.7610
NEW YORK STATE DORM AUTH REVS INSD SHIDMORE COLLEGE DATED DATE 06/15/93 FSA INSURED DUE 07/01/2001 4.500% JJ 01 RATING: MOODY AAA S&P AAA	649834LC0	CASH	75,000	100.0570	75,043	1,688	3,375	4.4974
WESTCHESTER CO N Y DATED DATE 12/01/85 DUE 12/01/2001 7.100% JD 01 RATING: MOODY AAA S&P AAA	957365SV2	CASH	10,000	105.0370	10,504	59	710	6.7593
NEW YORK CITY MUN WTR FIN AUTH WTR & SWR SYS REV SER A DATED DATE 08/16/95 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 06/15/2002 4.900% JD 15 RATING: MOODY A1 S&P A	649706X78	CASH	20,000	100.3190	20,064	44	980	4.8844
NEW YORK STATE DORM AUTH REVS CONS CITY UNIV SYS-SER A TCRS DATED DATE 06/01/93 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT FGIC INSURED DUE 07/01/2002 5.400% JJ 01 RATING: MOODY AAA S&P AAA	649834KA5	CASH	25,000	101.7980	25,450	675	1,350	5.3045

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STATEMENT PERIOD November 27, 1999
THROUGH December 31, 1999

ACCOUNT NUMBER 042-44287 MR3
TAXPAYER NUMBER 017-30 2729
LAST STATEMENT November 26, 1999

Your Portfolio Holdings (continued)

Municipal Bonds (continued)

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ACCRUED INTEREST	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
MUNICIPAL ASSISTANCE CORP NEW YORK CITY N Y SER E DATED DATE 04/01/96 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 07/01/2002 4.700% JJ 01 RATING: MOODY AA2 S&P AA	626190G30	CASH	20,000	100.2100	20,042	470	940	4.6902
NEW YORK STATE LOCAL GOVT ASSISTANCE CORP RFDG SER B DATED DATE 03/15/93 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 04/01/2003 5.100% AO 01 RATING: MOODY A3 S&P AA	649876HA0	CASH	25,000	100.9450	25,236	319	1,275	5.0523
NEW YORK ST MED CARE F/F AGY ST LUKES-ROOSEVELT HSP FHA MTG REV-A DATED DATE 07/01/93 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 02/15/2004 4.900% FA 15 CALL 08/15/03 102.000 RATING: MOODY AA2 S&P AAA	64988JDD9	CASH	30,000	99.8280	29,948	555	1,470	4.9085
HARRISON N Y O/O BSNK QUALIFIED DATED DATE 06/15/92 BOOK ENTRY ONLY DUE 06/15/2004 5.400% JD 15 RATING: MOODY AA1	415360RA6	CASH	50,000	102.7010	51,351	120	2,700	5.2579
NEW YORK ST DORM AUTH REVS N Y METHODIST HOSP DATED DATE 01/15/99 BOOK ENTRY ONLY AMBAC INSURED DUE 07/01/2004 4.500% JJ 01 RATING: MOODY AAA S&P AAA	649839ZC4	CASH	50,000	98.1650	49,083	1,125	2,250	4.5841

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THROUGH December 31, 1999

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LAST STATEMENT November 26, 1999

Your Portfolio Holdings (continued)

Municipal Bonds (continued)

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ACCRUED INTEREST	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
NEW YORK STATE G/O DATED DATE 02/01/92 BOOK ENTRY ONLY DUE 02/01/2005 6.750% FA 01 PRE-REFUNDED 02/01/02 @ 102.00 RATING: MOODY A2 S&P A+	649785Y71	CASH	25,000	105.9010	26,475	703	1,688	6.3758
NEW YORK ST LOC GOVT ASSISTNCE CORP RFDG SER C DATED DATE 07/01/93 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 04/01/2005 5.100% AO 01 CALL 04/01/03 102.000 RATING: MOODY A3 S&P AA-	649876JA8	CASH	50,000	100.6320	50,316	638	2,550	5.0680
NEW YORK CITY G/O SER H DATED DATE 01/28/97 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT AMBAC INSURED DUE 08/01/2005 5.000% FA 01 RATING: MOODY AAA S&P AAA	649665V60	CASH	30,000	100.3340	30,100	625	1,500	4.9834
NEW YORK CITY G/O RFDG SER A DATED DATE 07/28/94 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 08/01/2005 6.000% FA 01 CALL 08/01/04 101.500 RATING: MOODY A3 S&P A-	649653NV0	CASH	25,000	104.1230	26,031	625	1,500	5.7624
LONG ISLAND PWR AUTH N Y ELEC SYS REV DATED DATE 10/15/98 BOOK ENTRY ONLY FSA INSURED DUE 04/01/2006 5.000% AO 01 RATING: MOODY AAA S&P AAA	542690HX3	CASH	15,000	99.8860	14,983	188	750	5.0057

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THROUGH December 31, 1999

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TAXPAYER NUMBER 017-30-2729
LAST STATEMENT November 28, 1999

Your Portfolio Holdings (continued)

Municipal Bonds (continued)

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ACCRUED INTEREST	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
NEW YORK STATE LOCAL GOVT ASSISTANCE CORP SER C DATED DATE 12/01/92 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT DUE 04/01/2006 6.000% AO 01 PRE-REFUNDED 04/01/02 @ 102 00 RATING: MOODY AAA S&P AA-	649876GN3	CASH	50,000	104 7350	52,368	750	3,000	5 7287
NEW YORK ST DORM AUTH REVS ST JOHNS UNIV DATED DATE 10/15/96 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT MBIA INSURED DUE 07/01/2008 4.900% JJ 01 RATING: MOODY AAA S&P AAA	649836NP4	CASH	25,000	99 3520	24,838	613	1,225	4 9320
NEW YORK N Y G/O SER A DATED DATE 07/15/97 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT FGIC INSURED DUE 08/01/2008 4.600% FA 01 RATING: MOODY AAA S&P AAA	649667JU7	CASH	50,000	96 9690	48,485	958	2,300	4 7437
METROPOLITAN TRANSN AUTH N Y DEDICATED TAX FD SER A DATED DATE 10/01/96 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT MBIA INSURED DUE 04/01/2007 5.000% AO 01 RATING: MOODY AAA S&P AAA	59259NAL7	CASH	25,000	99.5120	24,878	313	1,250	5 0245

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STATEMENT PERIOD November 27, 1999
THROUGH December 31, 1999

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LAST STATEMENT November 26, 1999

Your Portfolio Holdings (continued)

Municipal Bonds (continued)

DESCRIPTION	SYMBOL/CUSIP	ACCT TYPE	QUANTITY	PRICE	MARKET VALUE	ACCRUED INTEREST	ESTIMATED ANNUAL INCOME	CURRENT YIELD (%)
PUERTO RICO ELEC PWR AUTH PWR REV SER-X DATED DATE 08/15/95 BOOK ENTRY ONLY ORIGINAL ISSUE DISCOUNT MBIA INSURED DUE 07/01/2007 5.200% JJ 01 RATING: MOODY AAA S&P AAA	745268TM4	CASH	30,000	101.9270	30,578	780	1,560	5.1017
METROPOLITAN TSPTN AUTH N Y EXCESS LOSS FD SPL OBLIG BDS DATED DATE 12/01/89 MBIA INSURED DUE 01/01/2008 6.875% JJ 01 PRE REFUNDED 01/01/00 @ 102.00 RATING: MOODY AAA S&P AAA	59260CAQ7	CASH	15,000	102.0000	15,300	516	1,031	6.7386
Total Municipal Bonds					**$886,903**	**$16,698**	**$44,607**	
TOTAL FIXED INCOME					**$886,903**	**$16,698**	**$44,607**	

YOUR TOTAL ACCRUED INTEREST	**$16,698**
YOUR TOTAL ESTIMATED ANNUAL INCOME	**$47,429**
YOUR PRICED PORTFOLIO HOLDINGS	**$935,373**

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THROUGH December 31, 1999

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TAXPAYER NUMBER 017-30 2729
LAST STATEMENT November 26, 1999

Transaction Detail

DEPOSITS AND WITHDRAWALS

DATE	TRANSACTION	DESCRIPTION	DEBIT AMOUNT	CREDIT AMOUNT
12/03/99	FND WIRED	MDA# MB745356 FNDS WIRED TO INVESTORS FIDUCIARY TRUST AC# 820121004044 FD# 00458	590.13	
12/16/99	FND WIRED	MDA# MB756320 FNDS WIRED TO INVESTORS FIDUCIARY TRUST AC# 820121004044 FD# 04091	1,840.00	
TOTAL			$-2,430.13	

DIVIDENDS

DATE	DESCRIPTION	SYMBOL/CUSIP	QUANTITY	RATE ($)	DEBIT AMOUNT	CREDIT AMOUNT
12/01/99	BLACKROCK NEW YORK INSURED MUNICIPAL 2008 TERM TRUST INC REC 11/15/99 PAY 12/01/99	BLN	3,300	0.0712		235.13
TOTAL						$235.13

INTEREST

DATE	DESCRIPTION	SYMBOL/CUSIP	QUANTITY	RATE (%)	DEBIT AMOUNT	CREDIT AMOUNT
12/01/99	WESTCHESTER CO N Y DUE 12/01/2001 7.100 REG INT ON 10000 BND REC 11/15/99 PAY 12/01/99	957365SV2	10,000	7.1000		355.00
12/15/99	HARRISON N Y G/O BSNK QUALIFIED DUE 08/15/2004 5.400 REG INT ON 50000 BND REC 11/30/99 PAY 12/15/99	415360RA6	50,000	5.4000		1,350.00
12/15/99	NEW YORK CITY MUN WTR FIN AUTH WTR & SWR SYS REV SER A DUE 06/15/2002 4.900 REG INT ON 20000 BND REC 12/01/99 PAY 12/15/99	649706X78	20,000	4.9000		490.00
TOTAL						$2,196.00

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Lowey Dannenberg Bemporad & Selinger Profit Sharing Plan	$1,000,001 - $5,000,000	Capital Gains/Dividends/Interest	None	NA
JT	Neuberger & Berman LLC*****	$500,001 - $1,000,000	Capital Gains	$2,501 - $5,000	NA
SP	SB MUNI NY MNY MKT PORT CL A	$1,001 - $15,000	Interest	$2,501 - $5,000	NA
SP	AT&T*	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Abbott Labs*	None	Dividends	None	S
SP	American Express*	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	American Greetings*	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	American Internat'l Gp*	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Amgen Inc.*	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Baker Hughes*	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	Bank of America*	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Bell Atlantic*	$250,001 - $500,000	Dividends	$5,001 - $15,000	NA
SP	Boeing*	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	Chase Manhattan Bank*	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Citigroup Inc.*	$50,001 - $100,000	Dividends	$201 - $1,000	NA
SP	Colegate Palmolive*	$50,001 - $100,000	Dividends	$201 - $1,000	NA
SP	Compaq*	None	Dividends	None	S
SP	Corning, Inc.*	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Data Broadcasting*	$15,001 - $50,000	Dividends	$1 - $200	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Delphi Automotive*	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Discount Auto Parts*	None	Dividends	None	S
SP	W. Disney Holding Co.*	None	Dividends	None	S
SP	Eastman Kodak*	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	Fannie Mae*	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	GTE Corp.*	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	General Electric*	$50,001 - $100,000	Dividends	$201 - $1,000	NA
SP	General Motors*	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	Gillette Corp.*	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	H. J. Heinz Co.*	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	Lucent Technologies*	$50,001 - $100,000	Dividends	$1 - $200	NA
SP	Mellon Bank*	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Microsoft*	$50,001 - $100,000	Dividends	None	NA
SP	Pepsico*	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	Pfizer*	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Procter & Gamble*	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Texas Instruments*	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Washington Mutual*	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	Xerox Corp.*	$1 - $1,000	Dividends	$1 - $200	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	AT&T**	None	Dividends	None	S
SP	Bankamerica Corp**	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	Bed, Bath & Beyond**	$1,001 - $15,000	Dividends	None	NA
SP	Caterpillar, Inc.**	$1,001 - $15,000	Dividends	$201 - $1,000	P
SP	Consolidated Graphics**	None	Dividends	None	S
SP	Coram Healthcare Wts.**	None	Dividends	None	Expired
SP	DST Systems**	$15,001 - $50,000	Dividends	None	P
SP	DuPont**	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Eastman Kodak**	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP	Exar Corp.**	$100,001 - $250,000	Dividends	None	NA
SP	Exxon**	None	Dividends	None	S
SP	General Motors**	None	Dividends	None	S
SP	International Paper**	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	KLA Tencor**	None	Dividends	None	S
SP	Lennar Corp.**	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	LNR Property Corp.**	None	Dividends	None	S
SP	LNR Property Corp. Cl B**	None	Dividends	None	S
SP	Media 100 Inc.**	$50,001 - $100,000	Dividends	None	NA
SP	Microchip Tech. Inc **	$15,001 - $50,000	Dividends	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Minnesota Mining**	None	Dividends	None	S
SP	Nortel Networks**	$1,001 - $15,000	Dividends	None	P
SP	NTN Communications, Inc.**	$15,001 - $50,000	Dividends	None	NA
SP	Oracle**	$100,001 - $250,000	Dividends	None	NA
SP	Paychex Inc.**	$50,001 - $100,000	Dividends	$201 - $1,000	NA
SP	Promus Hotel**	None	Dividends	None	S
SP	Quaker Fabric**	None	Dividends	None	S
SP	Saba Petroleum** (1)	None	Dividends	None	S
SP	Teva Pharm. ADR (TEVIV)**	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Toys R Us**	None	Dividends	None	S
SP	Trend Lines Inc.**	$1,001 - $15,000	Dividends	None	NA
SP	Prudential Muni MM Fund	$50,001 - $100,000	Interest	$1,001 - $2,500	NA
SP	Cytotherapeutics***	None	Dividends	None	S
SP	United Internat'l Holdings***	None	Dividends	None	S
SP	Newhall Limited Partnership***	$50,001 - $100,000	Dividends	$201 - $1,000	NA
SP	Morgan Stanley Asia Fund***	None	Dividends	None	S
SP	Scudder New Europe Fund***	None	Dividends	None	S
SP	SB Money Funds Govt***	$1,001 - $15,000	Dividends	$1 - $200	NA
SP	US Treasury Notes****	None	Interest	None	Matured

(1) Saba Petroleum changed its name to Greka Energy on 3/30/99 and Greka Energy was sold 11/24/99.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Avatar Conv. 7% of '05****	$50,001 - $100,000	Interest	$1,001 - $2,500	NA
SP	Avatar Holdings****	$15,001 - $50,000	Dividends	None	NA
SP	Barrick Gold Corp ****	$15,001 - $50,000	Dividends	None	NA
SP	Calmat Co.****	None	Dividends	None	S
SP	Equity Res. Ppty Pfd.****	$50,001 - $100,000	Dividends	$1,001 - $2,500	NA
SP	Interpool Inc.****	$1,001 - $15,000	Dividends	$201 - $1,000	P
SP	MONY****	$1,001 - $15,000	Dividends	$201 - $1,000	P
SP	Newhall Partnership DRs****	$50,001 - $100,000	Dividends	$1,001 - $2,500	NA
SP	Scottish Annuity***	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP	Ackerly Group***	$15,001 - $50,000	Dividends	$1 - $200	P
SP	Big City Radio***	$15,001 - $50,000	Dividends	None	P
SP	Citizens Utilities***	$50,001 - $100,000	Dividends	None	P
SP	JB Hunt Transport***	$1,001 - $15,000	Dividends	$1 - $200	P
SP	Liposome Co. Inc ***	$15,001 - $50,000	Dividends	None	P
SP	Octel Corp.***	$15,001 - $50,000	Dividends	None	P
SP	Security Capital Gp.***	$15,001 - $50,000	Dividends	None	P
SP	Young B'casts***	$15,001 - $50,000	Dividends	None	P
SP	PBOC Holdings****	$50,001 - $100,000	Dividends	None	P
SP	People's Pfd Cap Corp.****	$50,001 - $100,000	Dividends	$2,501 - $5,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Polaroid Corp.****	$15,001 - $50,000	Dividends	$1,001 - $2,500	P
SP	St. Joe Corp.****	$15,001 - $50,000	Dividends	$1 - $200	NA
SP	Alliance Muni Trust NY****	$100,001 - $250,000	Interest	$201 - $1,000	NA
JT	Alza Corp.*****	None	Dividends	None	S
JT	American Express*****	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	Amgen Inc.*****	$50,001 - $100,000	Dividends	$1 - $200	NA
JT	America Online*****	$100,001 - $250,000	Dividends	$1 - $200	NA
JT	Anheuser Busch*****	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	Citrix*****	None	Dividends	None	S
JT	Nokia Corp ADRs*****	$50,001 - $100,000	Dividends	$1 - $200	P
JT	Walt Disney*****	None	Dividends	None	S
JT	Gap*****	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	Intel Corp *****	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	MCI Worldcom*****	$15,001 - $50,000	Dividends	None	NA
JT	McDonalds*****	$15,001 - $50,000	Dividends	$1 - $200	NA
JT	Minnesota Mining*****	$15,001 - $50,000	Dividends	$201 - $1,000	P
JT	Pfizer*****	$15,001 - $50,000	Dividends	$201 - $1,000	NA
JT	RPM Inc /Ohio*****	None	Dividends	None	S
JT	American Mobile Satellite Corp******	$15,001 - $50,000	Dividends	None	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	London Pacific Group Ltd.******	$15,001 - $50,000	Dividends	$201 - $1,000	P
JT	Sirius Satellite Radio Inc.******	$15,001 - $50,000	Dividends	None	P
JT	Chief Auto Parts 10.5%of 2005	$15,001 - $50,000	Interest	$2,501 - $5,000	P
JT	Keebler Corp. 10.75%of 2006	$15,001 - $50,000	Interest	$2,501 - $5,000	P
JT	Ralph's Grocery 10.45%of 2004	$50,001 - $100,000	Interest	$5,001 - $15,000	P
JT	Walgreen*****	$15,001 - $50,000	Dividends	$1 - $200	P
JT	Wal-Mart*****	$15,001 - $50,000	Dividends	$1 - $200	P
JT	Wells Fargo*****	$15,001 - $50,000	Dividends	$1 - $200	P

*Discretionary account at Salomon Smith Barney/AS
**Discretionary account at Prudential Securities
***Discretionary account at Salomon Smith Barney/PM
****Discretionary account at Oppenheimer & Close
*****Discretionary account at Neuberger & Berman
******Discretionary account at Spear Leeds (opened in 1999)

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Abbott Laboratories*	Sold	6/11/99	$1,001 - $15,000
SP	Compaq*	Sold	11/10/99	$15,001 - $50,000
SP	Delphi*	Purchase	6/25/99	$1,001 - $15,000
SP	Discount Auto Parts*	Sold	10/5/99	$1,001 - $15,000
SP	Walt Disney Holding Co *	Sold	11/10/99	$15,001 - $50,000
SP	Texas Instruments*	Purchase	6/24/99	$1,001 - $15,000
SP	Xerox Corp *	Purchase	10/8/99	$1,001 - $15,000
SP	AT&T**	Sold	2/2/99	$1,001 - $15,000
SP	Caterpillar Inc **	Purchase	2/2/99	$15,001 - $50,000
SP	Consolidated Graphics**	Sold	11/24/99	$15,001 - $50,000
SP	DST Systems**	Purchase	12/20/99	$15,001 - $50,000
SP	Eastman Kodak**	Purchase	2/2/99	$15,001 - $50,000
SP	Exxon Corp **	Sold	2/2/99	$1,001 - $15,000
SP	General Motors**	Sold	2/2/99	$1,001 - $15,000
SP	Goodyear Tire**	Purchase	2/2/99	$15,001 - $50,000
SP	KLA Tencor**	Sold	1/28/99	$50,001 - $100,000

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SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	LNR Property Corp.**	Sold	11/24/99	$15,001 - $50,000
SP	LNR Property Corp. Cl.B**	Sold	11/24/99	$1,001 - $15,000
SP	Microchip Tech. Inc **	Sold	2/8/99	$1,001 - $15,000
SP	Minnesota Mining**	Sold	2/5/99	$1,001 - $15,000
SP	Nortel Networks**	Purchase	5/11/99	$15,001 - $50,000
SP	Promus Hotel**	Sold	11/23/99	$1,001 - $15,000
SP	Quaker Fabric**	Sold	11/24/99	$1,001 - $15,000
SP	Saba Petroleum** (1)	Exchange	3/30/99	$1,001 - $15,000
SP	Greka Energy** (1)	Sold	11/24/99	$1,001 - $15,000
SP	Toys R Us**	Sold	11/24/99	$1,001 - $15,000
SP	Trend Lines Inc.**	Sold	11/24/99	$1,001 - $15,000
SP	Fedex Corp.**	Purchase	4/8/99	$15,001 - $50,000
SP	Fedex Corp.**	Sold	11/24/99	$15,001 - $50,000
SP	Cytotherapeutics***	Sold	9/7/99	$1,001 - $15,000
SP	United Internat'l Holdings***	Sold	1/99,2/99,3/99	$15,001 - $50,000
SP	Morgan Stanley Asia Fd***	Sold	5/18/99	$1,001 - $15,000

(1) Saba Petroleum changed its name to Greka Energy on 3/30/99 and Greka Energy was sold 11/24/99.

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Interpool Inc.****	Purchase	8/99	$15,001 - $50,000
SP	MONY****	Purchase	2/99	$15,001 - $50,000
JT	Alza Corp.*****	Sold	5/3/99	$15,001 - $50,000
JT	Citrix*****	Sold	3/2/99	$15,001 - $50,000
JT	Walt Disney*****	Sold	5/6/99	$15,001 - $50,000
JT	Minnesota Mining*****	Purchase	12/21/99	$15,001 - $50,000
JT	Nokia ADR*****	Purchase	5/19/99	$15,001 - $50,000
JT	RPM/Ohio*****	Sold	11/2/99	$15,001 - $50,000
JT	American Mobil Sat ******	Purchase	12/27/99	$15,001 - $50,000
JT	London Pacific Gp******	Purchase	12/21/99	$15,001 - $50,000
JT	Sirius Satellite******	Purchase	12/27/99	$15,001 - $50,000
JT	Chief Auto Pts 10.5/05******	Purchase	3/18/99	$15,001 - $50,000
JT	Keebler Corp. 10.75/06******	Purchase	4/12/99	$15,001 - $50,000
JT	Ralph's Grocery10.45/04******	Purchase	10/29/99	$50,001 - $100,000
JT	Wal-Mart*****	Purchase	8/3/99	$15,001 - $50,000
JT	Walgreen*****	Purchase	12/21/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corparation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	Wells Fargo*****	Purchase	6/29/99	$15,001 - $50,000
SP	Scudder New Europe Fd***	Sold	1/28/99	$15,001 - $50,000
SP	Scottish Annuity***	Purchase	4/6/99	$15,001 - $50,000
SP	Ackerly Gp Inc***	Purchase	1/28/99	$15,001 - $50,000
SP	Big City Radio***	Purchase	5/25/99	$15,001 - $50,000
SP	Citizens Utilities***	Purchase	1/28/99	$15,001 - $50,000
SP	JB Hunt Transport***	Purchase	7/21/99	$15,001 - $50,000
SP	Liposome Co.***	Purchase	10/12/99	$15,001 - $50,000
SP	Octel Corp***	Purchase	7/7/99	$15,001 - $50,000
SP	Security Capital Gp***	Purchase	2/16/99	$15,001 - $50,000
SP	Young B'casting Inc.***	Purchase	7/1/99	$15,001 - $50,000
SP	Chartwell Re Corp***	Purchase	4/4/99	$15,001 - $50,000
SP	Chartwell Re Corp***	Sold	6/22/99	$15,001 - $50,000
SP	Thermo Electron***	Purchase	4/9/99	$15,001 - $50,000
SP	Thermo Electron***	Sold	7/1/99	$15,001 - $50,000
SP	Calmat ****	Sold	2/5/99	$15,001 - $50,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Citibank Mortgage	Mortgage on personal residence	$250,001 - $500,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Jt. Action Committee (Speech)	Nov. 15-16	NYC-Atlanta-Washington, DC	Y	Y	N	No
AIPAC (Speech)	Nov. 27-30	NYC-Ft. Lauderdale-NYC	Y	Y	Y	2 days

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
NONE	

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Frank D. Lucas
(Full Name)

P.O. Box 1039
(Mailing Address)

Cheyenne OK 73628

Daytime Telephone: 202-225-5565

Filer Status	[X] Member of the U.S. House of Representatives	State: OK District: 06	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Frank D. Lucas	5-16-2000

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Name Frank D. Lucas	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period; and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY account	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Panhandle Royalty Co. Stock	$1.001 - $15.000	Dividends	$1 - $200	NA
JT Security State Bank, Cheyenne, OK	$1.001 - $15.000	Interest	$201 - $1.000	NA
SP Western Farm Bureau IRA	$1.001 - $15.000	Interest	$1 - $200	NA
Apache Corporation	None	Royalty	$201 - $1.000	NA
Kerr McGee Oil and Gas (formerly Oryx)	None	Royalty	$201 - $1.000	NA
St Mary Operating Co.	None	Royalty	$1.001 - $2.500	NA
Crescendo Resources, LP	None	Royalty	$15.001 - $50.000	NA

Name Frank D. Lucas	Page ___ of

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Koch Petroleum	None	Royalty Payment	$201 - $1.000	NA
	Amoco Production Co.	None	Royalty Payment	$5.001 - $15.000	NA
	103 acres - Mineral Rights; Roger Mills, OK	$100.001 - $250.000	see above individual companies	None	NA
	Public Employee Retirement	$15.001 - $50.000	None	None	NA
SP	Oklahoma Teacher Retirement	$1.001 - $15.000	None	None	NA
SP	Texas Teacher Retirement	$1.001 - $15.000	None	None	NA
DC	Security State Bank; Cheyene, OK	$1.001 - $15.000	Interest	$1 - $200	NA
	480 acres - Farmland, House, Equipment, & Cattle; Cheyenne, OK	$100.001 - $250.000	Farm Income	$ 42,000 (gross)	NA
JT	320 acres - Farmland	$50.001 - $100.000	Farm Income	See above income	NA

Name Frank D. Lucas	Page ___of

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Security State Bank; Cheyenne, OK	Mortgage on Roger Mills Farm	$50,001 - $100,000

Name Frank D. Lucas	Page ___ of ___

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
New York Stock Exchange	July 25-26	OKC-NYC-DC	Y	Y	N	NA
National Watershed Coalition	May16-17	OKC-Austin, TX-DC	Y	N	N	NA

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 16 AM 8:26
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC MAY 11 2000
(Office Use Only)

(9)

Kenneth Ray Lucas
(Full Name)
993 Riva Ridge Ct. Union, Ky. 606/384-3345
(Mailing Address) (Daytime Telephone)

Filer Status	☑ Member of the U S House of Representatives	State Kentucky District Fourth	☐ Officer or Employee	Employing Office
Report Type	☐ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI**	Yes ☐	No ☑
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☑	No ☐

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Kenneth R Lucas	5/11/00

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Lincoln National (formerly Cigna)	Renewals	50,087
	Fortis	"	4210
	UNUM	"	2801
	Manu Life	"	2009
	Lincoln National Life & Annuity	"	6519
	Mass Mutual	"	360
	Provident	"	347
	Delta	"	1278
	Cross & Assoc.	"	4044
	Business Benefits	"	632
	Southeastern	"	4256
	Cigna	"	1462
	Kentucky Retirement System	Pension	16,433
	Cigna (Connecticut General Life)	"	722
	" " " "	Deferred Comp.	1096
	EFS Travel Agency	Spouse's Fees	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source N/A	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

			Block A	Block B: None	$1 – $1,000	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	$1,000,001 – $5,000,000	$5,000,001 – $25,000,000	$25,000,001 – $50,000,000	Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example Partnership Income or Farm Income)	Block D: None	$1 – $200	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	$1,000,001 – $5,000,000	Over $5,000,000	Block E: P, S, E, P
SP, DC, JT	Examples	SP	Mega Corp Stock					X								X																		
			Simon & Schuster			Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts						X									X										X						
	Fifth Third Bank stock											X				X			X			dividends + sale								X				S
SP	" " " "								X							X										X								
	Cigna IRA - transferred SEI										X																N/A							
	IRA - 5th/3rd Bank stock							X			X											Partial distribution						X						S
	" Fountain Square Equity Mf.							X														Distribution						X						S
SP	" " " " "							X																			N/A							

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Kenneth R. Lucas

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	IRA - Premier Asset Mgt Acct	G		V: N/A	
	D.L.W. & Associates U.S. 25 Richwood, Ky & I-71 Interchange - Verona, Ky Real estate investment	G	Other: land sale	VII	S
JT	Real estate - Gulf of Mexico Dr., - Longboat Key, Fla	F	RENT	V	
JT	Time share real estate - Port Royal Plantation, Hilton Head S.C.	D	RENT	IV	
	Fuller Square, Inc., & Florence Commercial commercial rental real estate Houston Rd., Florence, Ky.	G	RENT; INTEREST; INTEREST	IV; IV	
	Installment sale of practice to son P. T. Lucas	UNCERTAIN	Other: Installment sale	VIII	

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SCHEDULE IV — TRANSACTIONS

Name Kenneth R. Lucas | Page 6 of 9

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	DLW Associates - land sale		✓		2/99		✓								
	Fifth Third Bank stock sale		✓		4/99			✓							
	IRA - Fifth Third Bank stock sale		✓		11/99		✓								
	" - Fountain Square Equity Fd sale		✓		12/99		✓								

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Name Kenneth R. Lucas | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Hebron Deposit Bank, Hebron, Ky	R.E. mortgage - Gulf of Mexico Dr., Longboat Key Fla.				X						
JT	Liberty Bank, Hilton Head, S.C.	R.E. mortgage - time share Port Royal Plantation, Hilton Head, S.C.		X								
	Hebron Deposit Bank, Hebron, Ky	note - loan for wedding daughter's		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

N/A

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source N/A	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
License holder	Segemark Consulting - Lincoln Financial Gp. (formerly Cigna)
Director	The Drees Company
"	Northern Kentucky University Foundation
"	Florence Christian Services, Inc.
Partner	DLW Associates
Stockholder	Fuller Square, Inc. & Florence Commercial

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
2/1/67	Kenneth R. Lucas & Cigna (and successors)	Payment of vested renewal commissions to Mr. Lucas/or spouse for life

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 18 AM 8:31
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(7)

MAY 15 2000
(Office Use Only)

William P. Luther
(Full Name)

6375 St. Croix Trail North #147
(Mailing Address)

Stillwater MN 55082

Daytime Telephone: 651-730-4949

Filer Status: [X] Member of the U.S. House of Representatives — State: MN Distnct: 06 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I**	Yes [X] No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule I**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ] No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bill Luther	5/15/00

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Minnesota, House of Representatives, State Capitol, St. Paul MN 55155	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Former Law Practice (sole proprietorship)	$1,001 - $15,000	NA	None	
SP	Checking account, Marquette Bank, Brooklyn Park, 7608 Brooklyn Blvd, Brooklyn Park MN 55443	$1,001 - $15,000	Interest	$1 - $200	
	Checking accounts, US Bank, 90 S. 6th Street, Minneapolis MN 55480	$1,001 - $15,000	Interest	$1 - $200	
DC	Checking and Savings accounts, US Bank, 90 S. 6th Street Minneapolis, MN 55480	$1 - $1,000	Interest	$1 - $200	

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

DC	Checking and Savings accounts, Marquette Bank, Brooklyn Park, 7608 Brooklyn Blvd, Brooklyn Park MN 55433	$1,001 - $15,000	Interest	$1 - $200	
	Law firm profit sharing and pension trust, Richard L. Luther, Trustee, 601 Lakeshore Parkway, Suite 750, Minnetonka MN 55305	$500,001 - $1,000,000	NA	NA	
JT	Minnesota State Legislator's Defined Benefit Retirement Plans, 175 W. Lafayette Frontage Road S., St. Paul MN 55107	$100,001 - $250,000	NA	NA	
JT	Minnesota State Deferred Compensation Plans, 85 E. 7th Place Suite 285, St. Paul, MN 55101	$100,001 - $250,000	Dividends/Interest/Capital Gains	$15,001 - $50,000	
	Dean Witter Liquid Asset Funds Mutual Funds, 333 S. 7th Street Suite 1300, Mpls MN 55402	$1 - $1,000	Dividends	$201 - $1,000	
SP	Dean Witter Liquid Asset Funds Money Market, 333 S. 7th Street Suite 1300, Mpls MN 55402	$1 - $1,000	Dividends/Interest	$1 - $200	
SP	Putnam Investor Fund Mutual Funds, 265 Franklin Street, Boston MA 02110, c/o Dean Witter 333 S. 7th Street Suite 1300 , Mpls MN 55402	$50,001 - $100,000	Capital Gains and Dividends	$1,001 - $2,500	
SP	Voyageur Minnesota-Insured Funds Mutual Funds, 90 S. 7th Street, Suite 4400, Minneapolis MN 55402, c/o Dean Witter, 333 S. 7th Street, Suite 1300, Minneapolis MN 55402	$15,001 - $50,000	Dividends/Interest	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	IRA, Dean Witter Liquid Asset Funds Money Market, Fannie Mae bond, Dean Witter Pacific Growth Fund mutual fund, Dean Witter American Opportunites Fund, Dow 10 Unit Trust c/o Dean Witter and CMO Bond c/o Dean Witter 333 S. 7th St, Ste 1300, Mpls, MN 55402	$1,001 - $15,000	Dividends/Interest/Capital Gains	$1,001 - $2,500	
DC	Trusts dated 2/1/78 and 12/21/82, Zurich Kemper Total Return Fund and Schwab Money Market Funds (previously Kemper Funds), c/o Charles Schwab & Co., Inc., 7400 E. Orchard Road, Suite 1200, Englewood CO 80111	$50,001 - $100,000	Dividends/Interest/Capital Gains	$2,501 - $5,000	
SP	Pension, Northwest Airlines, Inc, 5101 Northwest Drive, St. Paul, MN 55111-3034	$1,001 - $15,000	NA	NA	
DC	1/2 interest in 7 acres, unimproved real estate, NW corner of Hwy 210 and old 210, Fergus Falls MN	$100,001 - $250,000	NA	None	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Putnam Investor Fund Mutual Funds	Sold	7/16/99	$1,001 - $15,000
SP	IRA,to Dean Witter Pacific Growth Fund to Dean Witter American Opportunities Fund and to Dow 10 Unit Trust c/o Dean Witter, 333 S. 7th St. Suite 1300, Mpls MN 55402	Exchange	2/12/99	$1,001 - $15,000
SP	IRA, CMO Bond c/o Dean Witter, 333 S. 7th Street Suite 1300, Mpls MN 55402	Purchase	8/4/99	$1,001 - $15,000

Name William P. Luther | **Page** 7 of 7

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Aspen Institute	3/19-3/21	Mpls-Hershey, Penn.-Mpls	Y	Y	Y	N
Democratic Leadership Council	4/30-5/1	Mpls-New Orleans-Mpls	Y	Y	N	N
The Aspen Institute	8/15-8/21	Mpls-Berlin-Mpls	Y	Y	Y	N

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

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(Office Use Only)

Carolyn B. Maloney
(Full Name)

49 East 92nd Street
(Mailing Address)

New York, New York 10128

Daytime Telephone: (212) 289-9450

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 14	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Carol B. Maloney	

2830

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Liberty Pittsburg Systems, Inc., Pittsburg, PA	Spouse	N/A
	Chromium Industries, Inc., Chicago, IL	Spouse	N/A
	CHW Maloney & Co., Incorporated, New York, NY	Spouse	N/A
	The Wall Street Fund, New York, NY	Spouse	N/A
	HSBC Funds Trust & HSBC Mutual Funds Trust, New York, NY	Spouse	N/A
	Source Capital, Ltd, Pittsburg, PA	Spouse	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples.	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	PARTNERSHIP, SUB-S INCOME	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X											X								P
	Indefinite Simon & Schuster																				Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X							
	Stock-Chromium Industries, Inc.-Chicago, IL						X													X		X											
	CD-First Coastal Bank-Virginia Beach, VA			X												X								X									
	Stock-Liberty Pittsburg Systems, Inc.-Pittsburg, PA						X															X											
	Rental Property & Residence, 49 East 92 Street, New York, NY									X					X												X						
	Rental Property-Single Family, 279 West Road, New Canaan, CT								X						X												X						
	Albright & Maloney Partnership, 10 High St., Boston, MA						X								X							X											
	Rental Real Estate, Jamaica, WI																																

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Carolyn B. Maloney

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; PARTNERSHIP, SUB-S INCOME; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	HPB Enterprises, T/A Albemarle Plantation-Real Estate Dev.-Hertford, NC	H	Rent, Interest, Capital Gains, Other Type of Income	VII	
	Stock-Aldo Farms of NC, Inc., Virginia Beach, VA	D	Dividends	VI	
	Stock-The Wall Street Fund	C	Dividends	III	
	Stock-Roll Finishing, Mt. Vernon, IN	E	Other Type of Income	VI	
	Stock-JTP, Inc.-Land Investment, Jonestown Road, Chesapeake, VA	D	Rent	I	
	Citibank, N.A.	B	Dividends	II	
	Shares-RBB/Bedford Money Market Fund	D	Dividends	IV	
	Shares-Dreyfus Liquid Assets	E	Dividends	IV	
	Undivided Interest-Land-96 acres-Route 64, Southampton County, VA	D	Capital Gains	I	
	Stock-Beechtree Park, Inc., T/A Holiday Travel Park, Virginia Beach, VA	G	Rent, Interest, Capital Gains	I	
	Shares-Fidelity Cash Reserve	C	Dividends	III	
	Shares-Fidelity U. S. Government Reserve	C	Dividends	III	
	Stock-CHW Maloney & Co., Inc.	C	Dividends	VI	
	Shares-Benhan Capital Preservation Fund, Mountainview, CA	C	Dividends	I	S
	Stock-Holiday Village, Inc. Real Estate, Virginia Beach, VA	D	Rent, Capital Gains	I	

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Carolyn B. Maloney

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	PARTNERSHIP, SUB-S INCOME	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	R. G. Bosher Irrevocable Life Ins. Trust - Insurance Trust	X																				X										
DC	HPB Enterprises, T/A Albemarle Plantation-Real estate 1% income interest, Hertford, NC			X											X	X	X			X				X								
	Bosher Family Partnership L.P., Virginia Beach, VA				X										X		X					X										
	236 shares El Paso Nat'l Gas Co.				X									X										X								
	Undivided 1/5 interest-real estate-Rose Hall, Jamaica						X								X							X										
	Stock-Birdneck Country Club Apt., Inc.					X									X							X										
SP	Bosher Family Partnership L.P., Virginia Beach, VA				X										X		X					X										
DC	Bosher Family Partnership L.P.,-Virginia Beach, VA				X										X		X					X										
	Stock-Sea Bay Development Corp.			X											X							X										
	Joint owner of land purchase option-Chesapeake, VA					X											X					X										
	Chromium Industries - loan (New 1999)					X										X											X					

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Name Carolyn B. Maloney

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Shares-Behnam Capital Preservation Fund		X		1999	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Chase Manhattan Bank, Worthington, OH (Paid off - Aug. 99)	Mortgage on 49 East 92nd Street, New York, NY										
	Citibank, N.A. (Refinanced in 1999)	Mortgage on 49 East 92nd Street, New York, NY					X					
	Chase Manhattan Mtg. Corp., Worthington, OH	Mortgage of 279 West Road, New Canaan Bank				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Qatar Center for Futuristic Studies	Mar. 4- 9	Wash., D.C.-Doha, Qatar-Wash., D.C.	Y	Y	N	N
	Aspen Institute	Mar. 19-21	Wash., D.C.-Hershey, PA-Wash., D.C.	Y	Y	Y	N
	Parliamentarians for Global Action and Asian Forum of Parliamentarians	Feb. 3- 7	Wash., D.C.-The Hague, Neth.-Wash., D.C.	Y	Y	N	N
	Cabazon Band of Mission Indians	Nov. 26-29	Wash., D.C.-Indio, CA-Wash., D.C.	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	HPB Enterprises, T/A Albemarle Plantation, Hertford, NC
Partner	Bosher Family Partnership, L.P., Virginia Beach, VA

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

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Use additional sheets if more space is required.

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MC

Carolyn B. Maloney
49 East 92nd Street
New York, New York 10128

ATTACHMENT TO SCHEDULE III, PAGE 6 OF 10
FINANCIAL DISCLOSURE STATEMENT
FOR THE YEAR DECEMBER 31, 19999

The following is a listing of the real estate holdings of the Bosher Family Partnership as of December 31, 1999:

1. 93.78 acres of land in Ocala, Florida.
2. Parcel #10-11-23-0000-0030-0000 located in Palatka, Florida.
3. Two residential lots in Pinehurst, North Carolina.
4. Two residential lots in Edenton, North Carolina.
5. 76.00 acres of land in Chowan County, North Carolina.
6. 107.00 acres of land in Elizabeth City, North Carolina.
7. 26 acres of land in Elizabeth City, North Carolina.

I certify that the statements I have made on this attachment to my financial disclosure statement for the calendar year 1999, are true, complete and correct to the best of my knowledge and belief.

Carolyn B. Maloney — June 15, 2000
Carolyn B. Maloney — Date

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

James H. Maloney
(Full Name)

15 Wooster Heights, Danbury, CT
(Mailing Address)

(202) 225-3822
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: CT District: 05	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Page 1/7

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Jo H. Maloney	5/15/2000

SCHEDULE I — EARNED INCOME

5/15/2000

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Danbury Public Schools, Danbury, CT	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan over which you have investment power, provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A Asset and/or Income Source	BLOCK B Value of Asset: A None	B $1,001 – $15,000	C $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock				X								X									X									P
	Simon & Schuster																		Royalties												
	1st Bank of Paducah, KY accounts														X									X				X			
	Maloney, Leaphart & Assoc., ~~Loans Receivable and Equity~~	P														X				X											
	Constitution State Strategic Assoc. (Shares)			X																X											
	Maloney Congress Committees (Loans)														X					X											

For additional assets and unearned income, use next page.

5/15/2000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Cong. James H. Maloney

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SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1,001 – $15,000	C $15,001 – $50,000	E $50,001 – $100,000	G $100,001 – $250,000	H $250,001 – $500,000	I $500,001 – $1,000,000	J $1,000,001 – $5,000,000	K $5,000,001 – $25,000,000	L $25,000,001 – $50,000,000	M Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	INTEREST	RENTS AND ROYALTIES	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1,001 – $2,500	III $2,501 – $5,000	IV $5,001 – $15,000	V $15,001 – $50,000	VI $50,001 – $100,000	VII $100,001 – $1,000,000	VIII $1,000,001 – $5,000,000	IX $5,000,001 – $25,000,000	X $25,000,001 – $50,000,000	XI Over $50,000,000	BLOCK E Transaction: P, S, E
	Nutmeg Federal Savings			X										X																
	Bank Accounts																													
	Maloney State Senate Committees (Loans)													X					X											
	U.S. Government Bonds			X										X					X											
	First Union Bank Accounts			X										X																
	Norwalk Saving Society Acc.			X										X							X									
	1988 Milldale Rd., Cheshire (Partial Interest)				X										X				X											
	Smith Barney IRA Money Market													X																P, S
	Smith Barney IRA Money Market													X																P, S
	Congressional Credit Union		X												X					X										

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5/15/2000

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	American National Bank, Cheshire, CT	Mortgage on 1988 Milldale Rd. Cheshire, CT		X								
	Francis A. Miniter, Hartford, CT	Mortgage on 1988 Milldale Rd. Cheshire, CT		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51, re-numbered as clause 5 of House Rule 26 in the 106th Congress) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

5/15/2000

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Name Cong. James H. Maloney

5/15/2000

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received i you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, ar the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid direct by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under th Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by a Federal political committee; travel provided to a spouse or dependent child that is tota independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expens
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	3/19-3/21	CT - Hershey, PA - CT*	Y	Y	Y	N*
	Democratic Leadership Council	4/30-5/3	DC - New Orleans - DC	Y	Y	Y	N
			* Travel at personal expense				

This page may be copied if more space is required.

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Name Cong. James H. Maloney	Page 7 of 7

5/15/2000

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Joint Tenancy	1988 Milldale Road, Cheshire, CT

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A	Maloney, Leaphart & Associates, P.C.	Dissolved P.C. wrapping up affairs; to distribute any net equity

GPO: 1999 55-105 (mac)

Use additional sheets if more space is required.

5/15/2000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 3:47
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (14)
MC
(Office Use Only)

Donald A. MANZULLO
(Full Name)

792 E. Lightsville Rd
(Mailing Address)

202-225-5676
Daytime Telephone

EGAN, IL 61047

Filer Status	[X] Member of the U.S. House of Representatives — State: IL District: 16	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Donald A. Manzullo	May 11, 2000

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Name Donald A. Manzullo | Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	FARM + RELATED INCOME		$7,800

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
NONE			~~$500~~
The Council of Insurance Agents & Brokers	Speech	Feb. 2, 1999	$2,000 (A)
American Rental Association	Speech	Apr. 20, 1999	$500 (B)
(A) Donation made to Northwest Community Center, Rockford, IL)			
(B) Donation made to American Red Cross for Refugee Relief in Balkans			

This page may be copied if more space is required.

Name Donald A MANZELLO | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock					X							X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X								X									X							
JT			OFF. BLD, 400 Washington OREGON, IL						X							X											X						
JT			Stillman BANCORP Accounts Stillman Valley, IL			X											X							X									
JT			FED CREDIT UNION Accounts			X											X							X									
			DAMANZELLO PC LAW OFFICE			X																											
			(DORMANT) Sole Shareholder		X																	X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Donald A. Manzello

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	• MANZELLO P.C. DEFINED																															
	BENEFIT PENSION PLAN –																															
	VARIOUS KEMPER, JANUS																															
	and other Mutual Funds																															
	held by First Union Clearing							X						X		X	X									X						P+S
	• DON MANZELLO IRA varios																															
	KEMPER, JANUS Mutuals				X									X			X						X									P+S
	• FREDA MANZELLO IRA –																															
	VARIOUS KEMPER & JANUS Mut.				X									X			X						X									P+S
JT	UMGraphics, Flight Hero Stock			X										X								X										P
JT	JANUS Mutuals			X										X			X						X									P
DC	NEIL, NOEL, Katy																															
	Delaware Agg Growth Mut.				X									X			X						X									P
	Eaton Vance Tax Mng Mut.	X												X			X								X							S
	JANUS Mutuals			X										X			X							X								P
	Raven Industries	X															X								X							S

(See ATTACHMENTS FOR EXPLANATION OF FUNDS)

This page may be copied if more space is required.

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Strong Corp Bond Fund
Am Century Int'l Bond
Berger Omni small Cap Value
American Century Income and Growth
Janus Enterprise

Donald Manzullo's IRA's

Mutual Funds held end of 1999

At First Union (formerly Evern) Traditional IRA

Each fund is between $1,001 and $15,000

Kemper Investment Trust Classic Growth
Kemper Eqty Tr Dreman
Kemper Growth Fund
Kemper Tech fund

Flight Serve Com	(Common Stock)	$1 - 1,000
Purchaseoft Inc	(Common Stock)	$1 - 1,000

Following funds were purchased or sold during 1999 at various times (not including reinvesting of dividends, interest). They were predecessor or replacement funds for the above funds and approximate the same value

Each fund is between $1,001 and $15,000

Kemper Blue Chip Fund
Kemper Small Cap Value
Kemper Europe
Kemper Small Cap Equity
Kemper Financial Services
Kemper Tech Fund

Roth IRA

Janus Mercury $1,001 - $15,000

Following funds were purchased or sold during 1999 at various times (not including reinvesting of dividends, interest). They were transferred into the Janus funds

Mentor Capital Growth	$1 - 1,000
Mentor Growth	Same
Mentor Income & Growth	Same
Mentor Perpetual Int'l	Same
Vanguard Total Stock Mkt	$1,001 - 15,000
Vanguard Asset Alloc	1,001 - 15,000

Freda Manzullo's IRA's

Mutual Funds Held End of 1999

At First Union (formerly Evern) Traditional IRA

Flightserve Com (Common Stock)	$1 - 1000
Purchaseoft, Inc	Same
Kemper Invest Trust Classic Growth	1,001 - $15,000
Kemper Equity Dreman Fin Serv	Same
Kemper Growth Fund	Same
Kemper Tech Fund	Same

The following funds were purchased or sold during 1999 at various times (not including reinvesting of dividends, interest). There were predecessor or replacement funds for the above and approximate the same value

Each Fund is between $1,001 and $15,000

Kemper Blue Chip
Kemper Dreman High Return
Semper Small Cap Value
Kemper Europe Fund
Kemper Fin Services
Kemper Tech Fund

Roth IRA

Janus Mercury	$1,001 - 15,000
Janus Fund	Same

The following funds were purchased or sold during 1999 at various times (not including reinvesting of dividends or interest). There were transferred into the Janus funds above.

Vanguard 500 Index Fund	$1,000 - 15,000
Vanguard Total Stk Mkt Fund	Same
Mentor Capital Growth	$1 - 1,001
Mentor Growth	Same
Mentor Income & Growth	Same
Mentor Perpetual Int'l	Same

Neil Manzullo's Accounts

Educational Savings Acct		
Standard and Poors SPY Fund	$1 - 1,001	
Janus Mercury	1,001 - 15,000	
Regular Savings		
Janus Mercury Fund	1,001 - 15,000	
Janus Balanced	1,001 - 15,00	
Sale of Eaton Vance Tax Mgt Grwth	$1,001 - $15,000	April, 1999
Purchase of Delaware Aggres. Grwth	Same	April, 1999

Noel Manzullo's Accounts

Educational Savings Acct		
Standard & Poors SPY Fund	$1 - 1,001	
College Illinois Bonds,	$1,001 - 15,000	
College Illinois Prepaid Tuition	$1,001 - 15,000	
Regular Savings		
Janus Balanced	$1,001 - 15,000	
Janus Mercury	$1,001 - 15,000	
Sale of Eaton Vance Tax Mgt Grwth	$1,001 - 15,000	April, 1999
Purchase of Delaware Aggres Grwth	Same	April, 1999

Katy Manzullo's Accounts

Educational Savings Account		
Standard & Poors SPY Fund	$1 - 1,001	
College Illinois Bonds	1,001 - 15,000	
College Ill. Prepaid Tuition	1,001 - 15,000	
Sale of Eaton Vance Tax Mgt Grwth	$1,001 - 15,000	April, 1999
Purchase of Delaware Aggres. Grwth	1,001 - 15,000	April, 1999
Regular Savings		
Janus Mercury Mutual Fund	1,001 - 15,000	
Janus Balanced Mutual Fund	1,001 15,000	

Donald Manzullo's Defined Benefit Trust

Funds held at the end of 1999 through First Union (formerly Evern)

American Century Income & Growth	$15,001 - 50,000
American Century International Bond	Same
Berger Omni Invt Fd	Same
Janus Worldwide	Same
Janus Enterprise	Same
Kemper Technology, Cl A & B	Same
Lord Abbot Developing Growth	Same
T Rowe Price Int'l Europe St Fund	Same
Strong Crop Bond Fund	Same
Vanguard Fund US Growth	Same
Vanguard Fixed Inc GNMA Fund	Same
Vanguard Fixed Inc Treasury Fund	Same
Vanguard Index Trust Growth	Same
Evergreen Money Mkt Fund	$1,001 - $15,000
Stillman Bank Check Act	$15,001 - 50,000
Cash	Same

The following funds were purchased or sold during 1999 at various times (not including reinvesting of dividends, interest) These were predecessor or replacement funds for the above funds and approximate the same values:

Kemper Europe Fund
Kemper High Yield Fund
T Rowe Price Int'l
Vanguard Index Trust 500
Kemper Global Income
Putnam Europe Growth Fund
Baron Asset Fund
Janus Worldwide
Lord Abbot Developing Growth
Mentor Perpetual Int'l
Franklin Small Cap
Kemper Dreman Fund
Kemper Technology
White Oak Growth Stock Portfolio
Vanguard Equity Income
Vanguard Fixed Income
Vanguard Index Trust 500
Vanguard Index Growth Fund
T Rowe Price Europe Fund
Kemper Value Small Cap
Kemper Europe

SCHEDULE IV — TRANSACTIONS

Name Donald A Manzullo | Page 5 of 9

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	Purchase of Unigenetics	X			Mid year/99	X									
JT	Sale of Raven Industries		X		" "	X									
DC	Sale of Eaton Vance														
	IRA Mgd. Mutual Fund		X		12/99		X								
DC	Purchase of Del. Aggressive Growth Mutual*	X			12/99		X								
	IRAs for Don Manzullo	X			3/99	X									
	IRAs for Freda Manzullo	X			3/99	X									
JT	Purchase of Janus Mutuals	X			throughout year	X									
~~JT~~	Vanguard Mutuals (IRA for Don)		X		Mid year	X									
	Vanguard Mutuals (IRA for Freda)				Mid year	X									
	*Don Neil, Noel + Katy Manzullo														

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Name Donald A Manzullo | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Stillman Bancorp	Mort - 400 Washington Oregon, Ill. 61053			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

2859

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Cong. Economic Leadership First (CELI)	3/26/94 to 4/1/94	Washington to Paris, Pleasures Rome to Washington	Y	Y		

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	Donald A. Manzullo PC (dormant)
Trustee	Donald A. Manzullo Defined Benefit Plan (sole shareholder)
Trustee	MPCharitable Trust (dormant)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	Agreement w/ Attorneys re Residual Fees has terminated TIO pending cases re expectation of fees. Agreement was approved by HSO Committee on Official Conduct on 1/17/93.	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

DONALD A. MANZULLO
INTERNATIONAL RELATIONS
VICE CHAIRMAN—INTERNATIONAL ECONOMIC POLICY AND TRADE
ASIA AND THE PACIFIC
SMALL BUSINESS
CHAIRMAN—TAX, FINANCE, AND EXPORTS
BANKING AND FINANCIAL SERVICES
CAPITAL MARKETS, SECURITIES AND GOVERNMENT SPONSORED ENTERPRISES

Congress of the United States
House of Representatives
Washington, DC 20515-1316

16TH DISTRICT, ILLINOIS
409 CANNON BUILDING
WASHINGTON, DC 20515
202/225-5676

DISTRICT OFFICES
415 SOUTH MULFORD ROAD
ROCKFORD, IL 61108
815/394-1231

181 N. VIRGINIA AVENUE
CRYSTAL LAKE, IL 60014
815/356-9800

June 8, 2000

The Honorable Jeff Trandahl
Clerk of the House of Representatives
H-154 The Capitol
Washington, D.C. 20515

HAND DELIVERED

MC ✓ (1)

Dear Mr. Trandahl:

This letter is intended to serve as an amendment to the financial disclosure report for 1999. The following information should be added to Schedule VII — Travel Payments and Reimbursements — of the report:

Source: Illinois Land Title Association

Dates: July 8, 9, 10 (1999)

Point of Departure-Destination-Point of Return:
Rockford, Illinois - Green Lake, Wisconsin - Rockford, Illinois

Lodging: Yes

Food: Yes

Was a Family Member Included?: Yes

Any time not at sponsor's expense: No

Sincerely,

Donald Manzullo
Member of Congress
Illinois, 16th District

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00 JUN -9 PM 12:52
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00 MAY 15 PM 6:07
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U.S. HOUSE OF REPRESENTATIVES

(12)

HAND DELIVERED

MC

(Office Use Only)

2863

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Edward J. Markey
(Full Name)

2108 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-2836

Filer Status	[X] Member of the U.S. House of Representatives	State: MA District 07	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Edward J. Markey	5/15/00

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Qcl 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Spouse: US Public Health Service, Dept. of Health & Human Services	Spouse salary	NA
	Spouse: Private practice of medicine	Fees	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Edward J. Markey | Page 3 of 12

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	Thomson Consumer Electronics	Speech	07/02/99	$899.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A Asset and/or Income Source	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP DC JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Cong. Federal Credit Union Accts	$1,001 - $15,000	Interest	$201 - $1,000	
	Salomon Smith Barney, IRA - Fid Ad Gr Opp T	None	Dividends	$1 - $200	S
	Rydex OTC Investor Class	$50,001 - $100,000	None	None	P
	Janus Global Technology Fund	$1,001 - $15,000	None	None	P
	Salomon Smith Barney, IRA -NASDAQ 100 Trust (QQQ)	$15,001 - $50,000	None	None	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Salomon Smith Barney, IRA - SB Money Funds Cash Port Cl. A	$1 - $1,000	Dividends	$1 - $200	
	Salomon Smith Barney, IRA - SB Gv SC A	None	Dividends	$1 - $200	S
	Salomon Smith Barney, IRA - SB Inv Gd Bond Rund A	None	Dividends	$1 - $200	S
	Fidelity Money Market Fund	$1 - $1,000	Interest	$1 - $200	P
	Fidelity S&P 500 Market Index Fund (Spartan)	$1,001 - $15,000	Capital Gains and Dividends	$5,001 - $15,000	S
JT	First Union Bank Acct	$1,001 - $15,000	Interest	$1 - $200	
SP	First Union Bank Acct	$1,001 - $15,000	Interest	$1 - $200	
SP	Morgan Stanley Dean Witter, IRA - S&P 500 Index B	$1 - $1,000	Capital Gains and Dividends	$1 - $200	E
SP	Morgan Stanley Dean Witter, IRA - Information Fund B	$1,001 - $15,000	Capital Gains	$1 - $200	P AND E
SP	Morgan Stanley Dean Witter, IRA - Liquid Asset Fund	$1 - $1,000	Dividends	$1 - $200	
SP	Morgan Stanley Dean Witter, IRA - NASDAQ 100 Trust Series I	$1,001 - $15,000	None	None	P AND E
SP	TIAA-CREF Retirement Annuity	$250,001 - $500,000	Interest	NA	
SP	TIAA-CREF Growth & Income Fund	$250,001 - $500,000	Capital Gains and Dividends	$5,001 - $15,000	
SP	Merrill Lynch Money Market Tax Free Acct.	$1,001 - $15,000	Dividends	$201 - $1,000	S
SP	Eaton Vance Nat. Municipal Bond Fund	None	Capital Gains and Dividends	$1,001 - $2,500	S
SP	Merrill Lynch S&P 500 Fund	None	Capital Gains	$50,001 - $100,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Fidelity Municipal Money Market Fund	$50,001 - $100,000	Interest	$2,501 - $5,000	S
SP	Janus Twenty Fund	$250,001 - $500,000	Capital Gains and Dividends	$15,001 - $50,000	
SP	Scudder Greater Europe Growth Fund	None	None	None	P AND S
SP	G.S. Internet Tollkeeper Fund - C	$50,001 - $100,000	None	None	P
SP	The Internet Fund	$50,001 - $100,000	Capital Gains	$1 - $200	P
SP	Janus Global Technology Fund	$100,001 - $250,000	None	None	P
SP	Janus Olympus Fund	$15,001 - $50,000	None	None	P
SP	Jacob Internet Fund	None	Capital Gains	$1,001 - $2,500	P AND S
SP	Rydex OTC Fund	$250,001 - $500,000	Dividends	$201 - $1,000	P
SP	R.S. Emerging Growth Fund	$50,001 - $100,000	None	None	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Smith Barney IRA - Gov Securities Fund	Sold	05/12/99	$1,001 - $15,000
	Smith Barney IRA - Investment Grade Bond Fund	Sold	05/12/99	$1,001 - $15,000
	Smith Barney IRA - Fidelity Advisor Grade	Sold	10/13/99	$1,001 - $15,000
	Smith Barney IRA - Putnam Intl New Opportunities	Sold	10/13/99	$1,001 - $15,000
	Smith Barney IRA - New Value Fund	Sold	10/13/99	$1,001 - $15,000
	Smith Barney IRA - NASDAQ 100 Trust Series	Purchase	05/12/99	$1,001 - $15,000
	Smith Barney IRA - NASDAQ 100 Series	Purchase	10/13/99	$1,001 - $15,000
	Fidelity S&P 500 Spartan Market Index Fund	Sold	11/26/99	$15,001 - $50,000
	Fidelity S&P 500 Spartan Market Index Fund	Sold	12/02/99	$1,001 - $15,000
	Fidelity S&P 500 Spartan Market Index Fund	Sold	12/08/99	$1,001 - $15,000
	Fidelity S&P 500 Spartan Market Index Fund	Sold	12/22/99	$1,001 - $15,000
	Fidelity S&P 500 Spartan Market Index Fund	Sold	12/31/99	$1,001 - $15,000
	Jacob Internet Fund	Purchase	12/13/99	$1,001 - $15,000
	Rydex OTC Investor Class Fund	Purchase	11/11/99	$1,001 - $15,000
	Rydex OTC Investor Class Fund	Purchase	11/26/99	$1,001 - $15,000
	Rydex OTC Investor Class Fund	Purchase	11/29/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Janus Global Technology Fund	Purchase	12/10/99	$1,001 - $15,000
	Jacob Internet Fund	Sold	12/27/99	$1,001 - $15,000
	Rydex OTC Investor Class Fund	Purchase	12/20/99	$1,001 - $15,000
	Rydex OTC Investor Class Fund	Purchase	12/22/99	$1,001 - $15,000
	Janus Global Technology Fund	Purchase	12/27/99	$1,001 - $15,000
	Janus Global Technology Fund	Purchase	12/31/99	$1,001 - $15,000
SP	Merrill Lynch S&P 500 Index Fund --Class D	Sold	11/26/99	$250,001 - $500,000
SP	Eaton Vance Nat'l Municipal Bond Fund	Sold	04/26/99	$50,001 - $100,000
SP	TIAA-CREF Retirement Fund - CREF Stock	Exchange	12/20/99	$100,001 - $250,000
SP	TIAA-CREF Retirement Fund - CREF Growth	Exchange	12/20/99	$100,001 - $250,000
SP	Scudder Greater Europe Growth Fund	Sold	02/23/99	$15,001 - $50,000
SP	Jacob Internet Fund	Sold	12/23/99	$50,001 - $100,000
SP	Scudder Greater Europe Growth Fund	Purchase	01/06/99	$15,001 - $50,000
SP	Janus Twenty Fund	Purchase	01/14/99	$15,001 - $50,000
SP	Rydex OTC Fund	Purchase	01/22/99	$15,001 - $50,000
SP	Rydex OTC Invester Class Fund	Purchase	02/02/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Rydex OTC Investor Class Fund	Purchase	02/05/99	$15,001 - $50,000
SP	Janus Twenty Fund	Purchase	04/19/99	$1,001 - $15,000
SP	Rydex OTC Investor Class Fund	Purchase	11/09/99	$15,001 - $50,000
SP	Rydex OTC Investor Class Fund	Purchase	11/29/99	$15,001 - $50,000
SP	R.S. Emerging Growth Fund	Purchase	12/07/99	$50,001 - $100,000
SP	Janus Global Technology Fund	Purchase	12/10/99	$50,001 - $100,000
SP	Janus Olympus Fund	Purchase	12/10/99	$15,001 - $50,000
SP	Jacob Internet Fund	Purchase	12/13/99	$15,001 - $50,000
SP	Jacob Internet Fund	Purchase	12/13/99	$1,001 - $15,000
SP	Rydex OTC Investor Class Fund	Purchase	12/20/99	$50,001 - $100,000
SP	Rydex OTC Investor Class Fund	Purchase	12/22/99	$15,001 - $50,000
SP	G.S. Internet Tollkeeper Class C Fund	Purchase	12/22/99	$15,001 - $50,000
SP	The Internet Fund	Purchase	12/23/99	$15,001 - $50,000
SP	G.S. Internet Tollkeeper Class C Fund	Purchase	12/23/99	$15,001 - $50,000
SP	Morgan Stanley Dean Witter IRA - S&P 500 Index B	Sold	12/07/99	$1,001 - $15,000
SP	Morgan Stanley Dean Witter IRA - Information Fund B	Purchase	12/07/99	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Morgan Stanley Dean Witter IRA - NASDAQ 100 Trust Series I	Purchase	12/13/99	$1,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 8-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
World Economic Forum	01/27/99 - 02/01/99	Wash., DC-Davos, Switzerland-Wash., DC	Y	Y	Y	0

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Board Member	Boston College Law School Board of Advisors (uncompensated)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 2:45
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(5)
MC
HAND DELIVERED
(Office Use Only)

Matthew Gilbert Martinez
(Full Name)

2269 Rayburn HOB; Washington, DC 20515
(Mailing Address)

202-225-5464
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: CALIFORNIA District 31ST CD	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [X]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Matthew G. Martinez	05/15/2000

2875

Name Matthew G. Martinez

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C								Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock				X								X										X									P
			Simon & Schuster		Indefinite																Royalties									X				
			1st Bank of Paducah, KY accounts					X									X									X								
SP	Apartment Units 439 S. New Ave Monterey Park, CA 91755								X							X												X						
SP	Apartment Units 3514 Beverly Blvd Montebello, CA 90640								X							X												X						
JT	Condo 1080 Wisconsin Ave Wash. D.C. 20007							X							unoccupied																			Sold

For additional assets and unearned income, use next page.

2876

Name: Matthew B Martinez

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	Condo - 1080 Wisconsin Ave. Washington, D.C. 20007		X		10-1999				X						

This page may be copied if more space is required.

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Name Matthew B. Martinez | Page 4 of 5

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP	Trust Savings Bank	Mortgage:				X						
	Monterey Park, CA 91775	439 S New Ave.										
		& 3514 Beverly Blvd.										

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	None	

Use additional sheets if more space is required.

2878

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source		Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Sallie Mae, Inc. 901 E. Street, N.W. Washington, D.C. 20004		May 13-16 1999	Wash., D.C.-- Panama City, Fla.-- Wash., D.C.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Frank R. Mascara
(Full Name)

831 Lincoln Avenue (h) 202-544-5964
(Mailing Address) Daytime Telephone:
Charleroi PA 15022 (w) 202-225-4665
(Office Room)

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 20	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[ ]	[X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	[X]	[ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[X]	[ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	[X]	[ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Frank R. Mascara	5/9/2000

Name Frank R. Mascara | Page 1 of 4

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A Asset and/or Income Source	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	Charleroi Federal Savings Bank C.D.'s and Checking Account	$50,001 - $100,000	Interest	$2,501 - $5,000	
JT	Mellon Bank C.D. and Checking Account	$1,001 - $15,000	Interest	$201 - $1,000	
	Washington County Retirment Fund	$100,001 - $250,000	None	None	
JT	609-11 Fallowfield Avenue, Charleroi, PA	$100,001 - $250,000	Rent	Gross $17,380 None (net)	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	Janney, Montgomery, Scott Inc. Money Market	Exchange	04-07-99	$1,001 - $15,000
JT	Goldman, Sachs Grw.Incm B	Exchange	04-07-99	$1,001 - $15,000
JT	Goldman, Sachs Grw.Incm B	Sold	08-16-99	$1,001 - $15,000

Name Frank R. Mascara | Page 3 of 4

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
JT	Charleroi Federal Savings Bank, Charleroi, PA 15022	Mortgage on 609-611 Fallowfield Avenue, Charleroi, PA 15022	$50,001 - $100,000
JT	National City Bank, Charleroi, PA 15022	Loan to Purchase Automobile	$10,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense.
Examples:	Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
	Chicago Board of Trade/Chicago Mercantile Exchange (Overview of the Exhange Operation and Tour of the Trading Floor)	06-21-1999	Pittsburgh, PA - Chicago, IL - Pittsburgh, PA	N	N	N	None

2884

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

ROBERT TAKEO MATSUI
(Full Name)

US House of Representatives, 2308 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-7163

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 05	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I**	X	
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule I**	X	
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	X	
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**		X
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert Matsui	May 15, 2000

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Collier, Shannon, Rill & Scott	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

2886

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	The Tax Council, Wash., DC	Speech	Aug. 4, 1999	$500.00

2887

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**		BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.		at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, *Examples:* JT	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	- $1,000 $1 - $2,500 $1 - $15,000	P
JT		Wright Patman Congressional Federal Credit Union	$1 - $1,000	Interest	$1 - $200
SP		Bank of America-checking	$1 - $1,000	Interest	$1 - $200
JT		White House Federal Credit Union	$1,001 - $15,000	Interest	$1 - $200
JT		Pacific Gas & Electric Common Stock	$1,001 - $15,000	Dividends	$201 - $1,000
JT		Sierra Pacific Resources Common Stock	$1,001 - $15,000	Dividends	$1 - $200
JT		CALIFORNA ST VAR PURP BOOK ENTRY BOND	$1,001 - $15,000	Interest	$201 - $1,000

NOTE:

Son Brian Matsui is no longer a dependent child.

2888

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	REDDING JT PWRS FING AUTH CA WSTEWTR REV RFDG SER-A-FGIC BOND	$1,001 - $15,000	Interest	$201 - $1,000	
JT	PUTNAM GLOBAL GROWTH FD INC COMMON STOCK	$15,001 - $50,000	Capital Gains	$1,001 - $2,500	
JT	CMA Fund - Merrill Lynch	$15,001 - $50,000	Dividends	$201 - $1,000	
JT	US Treasury Notes	$15,001 - $50,000	Interest	$2,501 - $5,000	
SP	Checking Account-Bank of America, Dinuba, CA (50% interest)	$1,001 - $15,000	Interest	$1 - $200	
SP	Cash Maximizer Account-Bank of America, Dinuba, CA (50% interest)	$1,001 - $15,000	Interest	$201 - $1,000	
SP	Farm and Residence, Dinuba, CA (50% interest)	$250,001 - $500,000	Rent	None	
SP	Okada Family Trust: CD-Bank of America, Dinuba, CA	$1,001 - $15,000	Interest	$1 - $200	Other
SP	Sun Financial Group bank account (proceeds from father's life insurance)	$50,001 - $100,000	Interest	$2,501 - $5,000	
SP	Bank of America, Dinuba, CA-Checking (Inherited funds)	$1,001 - $15,000	Interest	$1 - $200	
JT	Vortran Medical Technology 1, Inc.	$1 - $1,000	Interest	None	
JT	Westmed Holding Company	$1,001 - $15,000	Interest	None	
JT	Wright Patman Congressional FCU-held in trust for Brian R. Matsui	$1 - $1,000	Interest	$1 - $200	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	Vortran Medical Technology 1, Inc.	Exchange	March 5	$1,001 - $15,000
JT	Westmed Holding Company	Exchange	March 5	$1,001 - $15,000
JT	Natrov, Inc.	Exchange	March 5	$1,001 - $15,000

NOTE:

Nartrov, Inc. was dissolved and exchanged for shares in Vortran Medical Technology 1 and Westmed Holding.

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
California Council for International Trade	Jan. 14-15	Sacramento-Monterey-Wash., DC	Y	N	N	None
Brown University Asian American Students Association	Feb. 20	Wash., DC-Providence-Wash., DC	Y	N	N	None
100/442/MIS WWII Memorial Foundation	June 5	Sacramento-Los Angeles	Y	N	N	None
Aspen Institute	Aug. 16-21	Wash., DC-Berlin-Wash., DC	Y	Y	Y	None
Universal Studios	Oct. 8	Wash., DC-Los Angeles-Wash., DC	N	N	N	None
A. Magazine	Oct. 22	Wash., DC-Los Angeles-DC	N	N	N	None

FIFTH DISTRICT, MISSOURI
1330 LONGWORTH HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4535
400 E. 9TH STREET, SUITE 9350
KANSAS CITY, MO 64106
(816) 842-4545
301 W. LEXINGTON, ROOM 217
INDEPENDENCE, MO 64050
(816) 833-4545
http://www.house.gov/karenmccarthy

HAND DELIVERED

Congress of the United States
House of Representatives
Karen McCarthy

COMMITTEE ON COMMERCE
SUBCOMMITTEE ON ENERGY AND POWER
SUBCOMMITTEE ON TELECOMMUNICATIONS, TRADE, AND CONSUMER PROTECTION
SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS
DEMOCRATIC CAUCUS STEERING COMMITTEE

RECEIVED
00 JUN -6 PM 5:48
LEGISLATIVE RESOURCE CENTER

June 6, 2000

The Honorable Lamar Smith
Chairman
Committee on Standards of Official Conduct
HT-2, The Capitol
Washington, DC 20515-6328

(4)
MC

Dear Mr. Chairman:

On May 9, 2000 I signed my Financial Disclosure Statement for Calendar Year 1999 and asked my Staff Director, Sarah Dahlin, to hand deliver the statement and requisite copies to the Committee. That same day she delivered the documents to HT-2 in the Capitol. The documents were accepted by the staff at that office.

On May 15, my office received a phone call from a staff member at the Committee on Standards of Official Conduct asking if I had questions regarding the form and informing us that the documents ultimately needed to be filed with the Legislative Resource Center in 106 Cannon House Office Building. After learning that there were no outstanding questions on my form, the Committee staff member offered to forward the documents to 106 Cannon. My staff accepted the offer.

On June 1, my office received a call from JohnVargo of your staff inquiring as to why my Financial Disclosure Statement had not been filed. My Staff Director went over to HT-2 and spoke with staff in the Legislative Resource Center in an effort to sort this situation out since the original documents had been turned over to the Committee three weeks ago in advance of the May 15 deadline.

Unfortunately, no records are kept of incoming and outgoing documents in the HT-2 office and neither the Committee on Standards of Official Conduct staff nor the staff at the Legislative Resource Center have my documents. Since my disclosure was accepted and not forwarded I am technically recorded as late. Since this was not my intent and is the result of a series of clerical errors, I am requesting that you intervene to ensure the official record shows that my filing was received in accordance with the designated deadline. While I regret my staff did not take the documents to the Cannon Building at the outset, my original documents were turned over to your staff on May 9 and are now missing. If my original documents cannot be found, I will certainly submit a duplicate set. Anything you can do to assist me with this situation is deeply appreciated.

Warm personal regards,

Karen

Karen McCarthy

cc: The Honorable Howard Berman, Ranking Democratic Member
Mr. Jeff Trandahl, Clerk of the House

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF THE CLERK
00 JUN -6 PM 5:49
HAND DELIVERED
(Office Use Only)

Karen McCarthy
(Full Name)

1330 Longworth House Office Building — 202-225-4535
(Mailing Address) — Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: MO District: 5th (05)	[ ] Officer or Employee	Employing Office:	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:	

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [XX]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [XX]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [XX]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [XX]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [XX]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [XX]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [XX]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [XX]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	x Karen McCarthy Karen McCarthy	JUN 6 2000 5/9/00

2893

Name Karen McCarthy | Page 2 of 3

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B	Block C													Block D											Block E
		A None	B $1,001 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP													X																		P
	DC			Indefinite																Royalties								X				
	JT															X																
	Fund, Money Market Intrust, St. Louis, MO													X					S1						X							
	IRA/Waddell & Reed KC, MO			X												-NA-								-NA-								
	Country Club Bank KC, MO															X							X									
	Paine Webber Money Market KC, MO															X					X											
	State of MO Ret. System Jefferson City, MO			X												-NA-								-NA-								
	State of MO Pref. Comp. Plan, Jefferson City, MO			X												-NA-								-NA-								

For additional assets and unearned income, use next page.

Name Karen McCarthy | Page 3 of 3

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

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	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute - Pathways to Success For All Youth	Feb. 12-15	DC, MO - Tampa, FL - KC, MO	Y	Y	N	N
	Aspen Institute - Conference on US-Russia Relations	Aug. 15-21	KC, MO - Berlin, Germany - Berlin - Tel Aviv, Israel	Y	Y	Y	N
	Project Interchange - Seminar on Israel & Peace Process	Aug. 21-29	Berlin - Tel Aviv, Israel - Tel Avia - KC, MO	Y	Y	Y	N

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U STATES HOUSE OF REPRESENTATIVES

NCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

00 MAY 12 PM 5:19
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(Office Use Only)

Bill McCollum a/k/a Ira W. McCollum, Jr.
(Full Name)

600 Thistlewood Court
(Mailing Address)

Longwood FL 32779 — Daytime Telephone 202-225-2176

Filer Status	[X] Member of the U S House of Representatives	State FL District 08	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

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II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X] No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Bill McCollum	May 11, 2000

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
	The KMart Family Foundation	Participation in Kmart Kids Race Against Drugs Capitol Hill Challenge	September 22, 1999	$500.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description iin this block	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	40 acres real property Hernando County, Florida (60% interest)			$50,001 - $100,000	None	None	
	Congressional Federal Credit Union Account			$1,001 - $15,000	Dividends	None (.19¢ only)	
	Eubanks Hilyard et al, P.A. Profit sharing plan - Sun Trust			$100,001 - $250,000	Dividends, Interest and Capital Gains	NA	
	IRA-Quick & Reilly-Informix Corp. Stock			$1,001 - $15,000	None	None	P
	IRA-Quick & Reilly Money Market Account			$1,001 - $15,000	Dividends	$1 - $200	
	Quick & Reilly Money Market Account			$1,001 - $15,000	Dividends	$201 - $1,000	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	NationsBank Interest Checking Account	$1,001 - $15,000	Interest	$1 - $200	
	SunTrust Bank Interest Checking	$1,001 - $15,000	Interest	$1 - $200	
	Global Crossing Stock	$1,001 - $15,000	None	None	P
	Informix Corp. Stock	$1,001 - $15,000	None	None	P
	Informix Corp. Jan 00 Call options-Strike 10	$1,001 - $15,000	None	None	
	Informix Corp. Jan 99 Call options-Strike 5	None	Capital Gains	$5,001 - $15,000	S
	Insite Vision Stock	$1,001 - $15,000	None	None	
	Mattson Technology Stock	$15,001 - $50,000	None	None	P
	On Health Network Stock	$1,001 - $15,000	None	None	P
	S3 Inc. Stock	$1,001 - $15,000	None	None	Merger with Diamond Multi-media
	Trikon Technologies Stock	$1,001 - $15,000	None	None	
	COR Therapeutics Stock	$15,001 - $50,000	None	None	
	Xoma Corp. Stock	$1,001 - $15,000	None	None	
	Cephalon Stock	None	Capital Gains	$5,001 - $15,000	S

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Informix Corp. Stock	Purchase	03-04-99	$1,001 - $15,000
	Computer Network Technology Stock	Sold	02-01-99	$1,001 - $15,000
	Informix Corp Jan 99 Call Options Strike 5	Sold	01-14-99	$1,001 - $15,000
	Darden Restaurants Stock	Purchase	03-25-99	$1,001 - $15,000
	Darden Restaurants Stock	Sold	03-29-99	$1,001 - $15,000
	Integrated Device Technology Stock	Sold	05-11-99	$1,001 - $15,000
	Cephalon Stock	Sold	07-30-99	$15,001 - $50,000
	Genus Stock	Sold	07-30-99	$1,001 - $15,000
	Informix Stock	Purchase	06-15-99	$1,001 - $15,000
	Trikon Technologies Stock	Purchase	06-15-99	$1,001 - $15,000
	Global Crossing Stock	Purchase	11-04-99	$1,001 - $15,000
	Amylin Pharmaceuticals Stock	Sold	11-09-99	$1,001 - $15,000
	Mattson Technology Stock	Purchase	11-12-99	$15,001 - $50,000
	On Health Network Stock	Purchase	11-12-99	$1,001 - $15,000

2900

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Congressional Study Group on Germany	March 27-April 4, 1999	Orlando-Frankfurt-Berlin-Munich-Frankfurt-Orlando	Y	Y	Y	2 days
Leadership Roundtable	October 22-23, 1999	Orlando-Fort Myers-Orlando	Y	Y	N	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
President	Bill McCollum Intern Program, Inc. (non profit for high school students)
President	Committee on Limiting Terms, Inc. (non profit educational)
President	Committee on Limiting Terms Lobby, Inc. (non profit educational)

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
01-03-81	Eubanks, Hilyard, et al, P.A.	There is no formal agreement, but my former law firm and its successor (names in "Parties To") have allowed me to keep the principal accumulated before my employment terminated in the firm's profit sharing plan and to share proportionately in the earnings
01-03-81	Eubanks, Hilyard, et al, P.A.	of the plan.

2904

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

James O. McCrery, III
(Full Name)

2104 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202 225.2777

Filer Status	[X] Member of the U S House of Representatives	State LA District 04	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS–Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics In Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	J. McCrery, III.	5/11/00

Name James O. McCrery, III | Page 1 of 1

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Bossier Parish Community College	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
	SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
	1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
	IRA, AmSouth (Commercial National Bank), Shreveport, Louisiana	$15,001 - $50,000	NA	None	NA
	Land, Rapides Parish, Louisiana (A 1/6 undivided interest in approximately 62 acres.)	$1,001 - $15,000	NA	None	NA
	Land, Vernon Parish, Louisiana (An undivided 1/2 interest in approximately 36 acres including residence and 12 unit apartment complex.)	$100,001 - $250,000	NA	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Land, DeSoto Parish, Louisiana (An undivided interest in approximately 160 acres.)	$1,001 - $15,000	NA	None	NA
	Fidelity Advisor Growth Opportunity Mutual Fund, AmSouth (Commercial National Bank), Shreveport, Louisiana	$1,001 - $15,000	Dividends (None-$200) and Capital Gains (None-$200)	$1 - $200	
	Fidelity Advisor Equity Growth Mutual Fund, AmSouth (Commercial National Bank), Shreveport, Louisiana	$1,001 - $15,000	Dividends (None-$200) and Capital Gains (None-$200)	$1 - $200	
	Templeton FDS Inc., Mutual Fund, AmSouth (Commerical National Bank), Shreveport, Louisiana	$1,001 - $15,000	Dividends (None-$200) and Capital Gains (None-$200)	$1 - $200	
	GAM FES Inc., International Mutual Fund, AmSouth (Commercial National Bank), Shreveport, Louisiana	$1,001 - $15,000	Dividends (None-$200) and Capital Gain (None-$200)	$1 - $200	

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples. Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
The Awakening Board of Directors	Jan. 7-10, 1999	Shreveport, LA-Brunswick/Glynco, GA-Shreveport, LA	Y	Y	Y	None
Harvard University	Jan. 21-23, 1999	Washington, DC-Miami, Fl; Ft. Lauderdale, Fl- Shreveport, LA	Y	Y	N	None
Blue Cross and Blue Shield of Colorado	Mar. 18-20, 1999	Washington, DC- Phoenix, AZ-Shreveport, LA	Y	Y	N	None
Corning's Public Policy Conference	Oct. 29-31, 1999	Washington, DC-Augusta, GA-Shreveport, LA	Y	Y	N	None
American Medical Assocation	Dec. 5-6, 1999	Shreveport, LA-San Diego, CA-Shreveport, LA	Y	Y	N	None

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

James A. McDermott
(Full Name)

1820 9th Avenue West
(Mailing Address)
Seattle WA 98119

Daytime Telephone: 202-225-3106

Filer Status	[X] Member of the U.S. House of Representatives	State: WA District: 07	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? — Yes [X] No [ ]
If yes, complete and attach Schedule I.

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? — Yes [ ] No [X]
If yes, complete and attach Schedule II.

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? — Yes [X] No [ ]
If yes, complete and attach Schedule III.

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? — Yes [X] No [ ]
If yes, complete and attach Schedule IV.

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? — Yes [ ] No [X]
If yes, complete and attach Schedule V.

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? — Yes [ ] No [X]
If yes, complete and attach Schedule VI.

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? — Yes [X] No [ ]
If yes, complete and attach Schedule VII.

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? — Yes [X] No [ ]
If yes, complete and attach Schedule VIII.

IX. Did you have any reportable agreement or arrangement with an outside entity? — Yes [ ] No [X]
If yes, complete and attach Schedule IX.

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION

I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.

SIGNATURE OF REPORTING INDIVIDUAL: James A. McDermott

DATE (Month/Day/Year): 5-15-00

2909

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Soha & Lang, Attorneys at Law	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year For rental property or land, provide an address Provide full names of any mutual funds. For a self-directed IRA (i.e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description iin this block	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for Income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	State of Washington Retirement Account	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	Soha & Lang P.S 401(k) Retirement Plan (91-1742107)	$50,001 - $100,000	Interest	$5,001 - $15,000	
SP	Janus Twenty Fund (203235484)	$1,001 - $15,000	Capital Gains and Dividends	$1 - $200	
SP	SSB Individual Retirement Account Custodian (519-65946-17 144) (See attached pg 3a-3d)	$50,001 - $100,000	Dividends	$5,001 - $15,000	

2911

SALOMON SMITH BARNEY

A member of citigroup

Ref: 00003068 00010866

Individual Retirement Account

November 29 - December 31, 1999

3a

519L981446594600000306 8 299365AG01 IRAFO045A
THERESE HANSEN
SSB IRA CUSTODIAN
[redacted]

SALOMON SMITH BARNEY INC.
Your Financial Consultant

Account number 519-65946-17

[redacted]

Account value

	Last period	This period
Money funds	$ 150.75	$ 151.66
Accrued money fund dividends	.28	.08
Stocks	31,372.00	35,006.25
Mutual funds	60,506.95	63,520.54
Net value	**$ 92,029.98**	**$ 98,678.53**

Fair Market Value 12/31/99 $ 98,678.53

Earnings summary

	This period	This year
Dividends	$ 247.41	$ 394.41
Money funds earnings	.91	4.73
Cap. gains distributions	6,599.71	6,599.71
Total	**$ 6,848.03**	**$ 6,998.85**

Cash and money funds balance

	This period
Opening balance	**$ 150.75**
Securities bought and other subtractions	-6,647.12
Securities sold and other additions	0.00
Deposits	0.00
Withdrawals	0.00
Dividends credited	247.41
Money funds earnings reinvested	.91
Capital gains distributions credited	6,599.71
Closing balance	**$ 151.66**

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Individual Retirement Account
November 29 - December 31, 1999 3b.

THERESE HANSEN

Account number 519-65946-17

IRA activity summary

For your convenience the Salomon Smith Barney statement tracks your deductible and non-deductible IRA contributions based upon information you provided to your Financial Consultant. However, Salomon Smith Barney reports to the IRS only the total amount you contribute to your IRA.

	1999	1998
Contributions		
Unspecified	$ 2,000.00	$ 2,000.00
Total contributions	**$ 2,000.00**	**$ 2,000.00**
Rollovers and Transfers		
Total amount rolled over	0.00	66,467.62

Primary Beneficiaries

Contact your Financial Consultant for the appropriate documenta to change or update your beneficiary information.

JIM MCDERMOTT

Portfolio details

The values of your holdings are as of 12/31/99.

Money funds

Description	No. of shares	Market value	Accrued dividends	Annualized Dividend Yield	Comment
SB MONEY FUNDS CASH PORT CL A	151.66	$ 151.66	$ .08	5.17%	
Total money funds		**$ 151.66**	**$ .08**		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated Income (annualized)	U.S. Dollar Market value	Research* Rating	Comment
ICOS CORP	OTC	100	$ 29.25			$ 2,925.00		Symbol: ICOS
MICROSOFT CORP	OTC	200	116.75			23,350.00	1/M	Symbol: MSFT\Rated: A-
STARBUCKS CORP	OTC	200	24.25			4,850.00		Symbol: SBUX
WASHINGTON MUTUAL INC	NYSE	150	25.875	4.019	156.00	3,881.25	1/H	Symbol: WM\Rated: B+
Total stocks					**$ 156.00**	**$ 35,006.25**		

**Please refer to the back of page 1 for definitions of research ratings.*

Mutual funds

Description	Number of shares	Price	Dividend yield	Anticipated income (annualized)	Market value	Comment
AIM VALUE FUND CL B	564.485	$ 47.20	.438%	$ 116.84	$ 26,643.69	
ALGER FD SMALL CAPITALIZATION PORTFOLIO CLASS B	560.192	10.40			5,826.00	

2913

Individual Retirement Account
November 29 - December 31, 1999 3c

THERESE HANSEN

Account number 519-65946-17 14

Mutual funds
continued

Description	Number of shares	Price	Dividend yield	Anticipated income (annualized)	Market value	Comment
ALLIANCE GROWTH FUND CL B	577.675	$ 42.73	.023%	$ 5.77	$ 24,684.05	
SOGEN INTERNATIONAL FUND	258.288	24.65	3.354	213.60	6,366.80	
Total mutual funds				**$ 336.21**	**$ 63,620.54**	

Anticipated annual income

This value is a grand total of all the anticipated annual income amounts that are shown on the statement.

Total anticipated income (annualized)	**$ 492.21**

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/08/99	Reinvest	ALLIANCE GROWTH FUND CL B	22.458	$ 40.74	$ -914.94
12/08/99	Reinvest	ALLIANCE GROWTH FUND CL B	66.727	40.74	-2,718.45
12/15/99	Reinvest	ALGER FD SMALL CAPITALIZATION PORTFOLIO CLASS B	51.211	9.81	-502.38
12/15/99	Reinvest	ALGER FD SMALL CAPITALIZATION PORTFOLIO CLASS B	35.926	9.81	-352.43
12/20/99	Reinvest	AIM VALUE FUND CL B	10.316	45.19	-466.18
12/20/99	Reinvest	AIM VALUE FUND CL B	27.557	45.19	-1,245.33
12/22/99	Reinvest	SOGEN INTERNATIONAL FUND	10.343	23.92	-247.41
12/22/99	Reinvest	SOGEN INTERNATIONAL FUND	2.755	23.92	-65.90
12/22/99	Reinvest	SOGEN INTERNATIONAL FUND	13.968	23.92	-334.12
Total securities bought and other subtractions					**$ -6,847.12**
Total securities sold and other additions					**$ 0.00**

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

Dividends

Date	Description	Comment	Taxable	Non taxable	Amount
12/22/99	SOGEN INTERNATIONAL FUND	PERIODIC DIST ON 247.945 SHS REINV DIVIDEND RECORD 12/17/99 PAY 12/20/99	$ 247.41	.	$ 247.41
Total dividends earned			**$ 247.41**	**$ 0.00**	**$ 247.41**

2914

SALOMON SMITH BARNEY

A member of citigroup

Ref: 00003066 00010869

Individual Retirement Account

November 29 - December 31, 1999 3d

THERESE HANSEN

Account number 519-65946-17

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amoun
12/10/99	SB MONEY FUNDS CASH PORT CL A	REINVESTED FOR PERIOD 11/15/99-12/12/99 28 DAYS AVERAGE YIELD 5.10 %.	$ .56		$ .5
12/29/99	SB MONEY FUNDS CASH PORT CL A	REINVESTED FOR PERIOD 12/13/99-12/29/99 17 DAYS AVERAGE YIELD 5.16 %.	.35		.3
Total earnings from money funds			**$ .91**	**$ 0.00**	**$ .91**

Capital gains distributions

Date	Description	Comment	Long Term	Short Term	Amount
12/08/99	ALLIANCE GROWTH FUND CL B	SPECIAL DIST ON 555.217 SHS REINV CAP GAIN RECORD 12/03/99 PAY 12/09/99 S/T CAP GAIN 555.217 SHS		$ 914.94	$ 914.94
12/08/99	ALLIANCE GROWTH FUND CL B	SPECIAL DIST ON 510.948 SHS REINV CAP GAIN RECORD 12/03/99 PAY 12/09/99	2,718.45		2,718.45
12/15/99	ALGER FD SMALL CAPITALIZATION PORTFOLIO CLASS B	ANNUAL DIST ON 421.844 SHS REINV CAP GAIN RECORD 12/09/99 PAY 12/10/99 S/T CAP GAIN 421.844 SHS		502.38	502.38
12/15/99	ALGER FD SMALL CAPITALIZATION PORTFOLIO CLASS B	ANNUAL DIST ON 437.129 SHS REINV CAP GAIN RECORD 12/09/99 PAY 12/10/99	352.43		352.43
12/20/99	AIM VALUE FUND CL B	PERIODIC DIST ON 554.169 SHS REINV CAP GAIN RECORD 12/16/99 PAY 12/17/99 S/T CAP GAIN 554.169 SHS		466.16	466.16
12/20/99	AIM VALUE FUND CL B	PERIODIC DIST ON 536.928 SHS REINV CAP GAIN RECORD 12/16/99 PAY 12/17/99	1,245.33		1,245.33
12/22/99	SOGEN INTERNATIONAL FUND	SPECIAL DIST ON 255.533 SHS REINV CAP GAIN RECORD 12/17/99 PAY 12/20/99 S/T CAP GAIN 255.533 SHS		65.90	65.90
12/22/99	SOGEN INTERNATIONAL FUND	SPECIAL DIST ON 244.320 SHS REINV CAP GAIN RECORD 12/17/99 PAY 12/20/99	334.12		334.12
Total income from capital gains distributions			**$ 4,650.33**	**$ 1,948.38**	**$ 6,599.71**

Message: *Please note that Salomon Smith Barney is required by law to report the December 31, 1999 Fair Market Value of this account to the Internal Revenue Service. Salomon Smith Barney will forward this information to the IRS on or before May 31, 2000 on IRS Form 5498.*

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	SSB Seperate Property (519-35651-15 144) (See attached pg 4a-4b)	$1,001 - $15,000	Capital Gains	$201 - $1,000	
	Carlyle Real Estate L.P. XIII	$1,001 - $15,000	Interest	$1 - $200	
	State of Washington Deferred Compensation Program	$15,001 - $50,000	Interest	$201 - $1,000	
	SSB Ira Custodian (443-65137-19 130) (See attached pg 4c-4h)	$250,001 - $500,000	Capital Gains and Dividends	$1,001 - $2,500	
	SSB IRA Rollover Custodian (443-65136-10 130) (This acct was rollovered to the SSB IRA Custodian Account on Jun 30, 1999 and became acct #443-65137-19 130) (See attached pg 4i-4n)	$100,001 - $250,000	Capital Gains and Dividends	$201 - $1,000	
	TIAA/CREF Annuity	$15,001 - $50,000	Interest	$201 - $1,000	
	Fidelity Bankers Life Annuity	$1,001 - $15,000	Interest	$201 - $1,000	

Anticipated annual income

This value is a grand total of all the anticipated annual income amounts that are shown on the statement

Total anticipated income (annualized)	$ 1 15

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/08/99	Reinvest	ALLIANCE GROWTH FUND CL B	4 504	$ 40 74	$ -183 49
12/08/99	Reinvest	ALLIANCE GROWTH FUND CL B	13 382	40 74	-545 17
Total securities bought and other subtractions					$ -728 66
Total securities sold and other additions					$ 0 00

Earnings details

The tax status of earnings is reliable to the best of our knowledge Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Capital gains distributions

Date	Description	Comment	Long Term	Short Term	Amount
12/08/99	ALLIANCE GROWTH FUND CL B	SPECIAL DIST ON 111 346 SHS REINV CAP GAIN RECORD 12/03/99 PAY 12/09/99 S/T CAP GAIN 111 346 SHS		$ 183 49	$ 183 49
12/08/99	ALLIANCE GROWTH FUND CL B	SPECIAL DIST ON 102 468 SHS REINV CAP GAIN RECORD 12/03/99 PAY 12/09/99	545 17		545 17
Total income from capital gains distributions			$ 545 17	$ 183 49	$ 728 66

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SALOMON SMITH BARNEY

A member of citigroup

Ref: 00002750 00012210

Client Statement

November 29 - December 31, 1999 46

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THERESE HANSEN
SEPERATE PROPERTY
[redacted]

SALOMON SMITH BARNEY INC.
Your Financial Consultant

Account number 519-35651-15 1

[redacted]

Account value

	Last period	This period
Cash balance	$ .24	$ .24
Mutual funds	4,669.94	4,950.27
Net value	**$ 4,670.18**	**$ 4,950.51**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Money funds earnings	$ 0.00	$ .24	$ 0.00
Cap. gains distributions	728.66	728.66	0.00
Total	**$ 728.66**	**$ 728.90**	**$ 0.00**

Cash balance

	This period
Opening balance	**$ .24**
Securities bought and other subtractions	-728.66
Securities sold and other additions	0.00
Deposits	0.00
Capital gains distributions credited	728.66
Closing balance	**$ .24**

Portfolio details

The values of your holdings are as of 12/31/99.

Mutual funds

Description	Number of shares	Price	Dividend yield	Anticipated income (annualized)	Market value	Comment
ALLIANCE GROWTH FUND CL B	115.85	$ 42.73	023%	$ 1.15	$ 4,950.27	
Total mutual funds				**$ 1.18**	**$ 4,950.27**	

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SALOMON SMITH BARNEY

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Ref: 00001085 00006428

Preferred Client IRA Statement

December 1 - December 31, 1999 4c

Page

443L991306513700000108 5 299365AC01 PCAFO016A
JAMES A MCDERMOTT
SSB IRA CUSTODIAN
[redacted]

SALOMON SMITH BARNEY INC.
Your Financial Consultant

Account number 443-65137-

[redacted]

Preferred Client Service Center: 800-232-4454

Account value

	Last period	This period	%
Money funds	$ 24,228.77	$ 8,874.84	2.13
Common stocks & options	315,145.13	412,277.10	97.87
Net value	**$ 339,373.90**	**$ 421,251.94**	**100**

Fair Market Value 12/31/99 $ 421,251.94

Earnings summary

	This period	This y
Dividends	$ 36.02	$ 564
Money funds earnings	108.05	486
Total	$ 144.07	$ 1,050

Additional summary information

	This period	This y
FRGN tax withheld	$ 0.00	$ 6

Gain/loss summary

	This period	This ye
Realized gain or (loss)	$ 0.00	$ 34,945.07 $ 2,039.75
Unrealized gain or (loss)	240,239.47	*Not applicat*

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SALOMON SMITH BARNEY

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Ref 00001085 00006429

Preferred Client IRA Statement

December 1 - December 31, 1999 4d

JAMES A MCDERMOTT

Account number 443-65137-

Cash and money funds balance

	This period	This year
Opening balance	**$ 24,228.77**	
Securities bought and other subtractions	-15,398.00	
Securities sold and other additions	0.00	
Deposits	0.00	28,796.95
Withdrawals	0.00	-3,660.62
Dividends credited	36.02	
Money funds earnings credited	108.05	
Closing balance	**$ 8,974.84**	

Portfolio summary

	This period	Year-to-date
Opening value of securities	339,373.90	128,160.2
+ Opening cash balance	0.00	0.0
= Opening portfolio balance	339,373.90	128,160.2
Securities deposited/withdrawn net	0.00	101,027.9
Capital deposited/withdrawn net	0.00	25,136.3
Adjusted opening value	339,373.90	254,324.5
Closing value of securities	421,251.94	421,251.9
+ Closing cash balance	0.00	0.0
= Closing portfolio value	421,251.94	421,251.9

Note: Securities deposited/withdrawn net = The value of securities on the day the were debited from or credited to the account as reflected in the "Other security activity" section.
Capital deposited/withdrawn net = Cash withdrawals and deposits, credit card payments, FMA Card activity, checks written, and Money funds/Insured Deposit Account℠ transfers.

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IRA activity summary

For your convenience the Salomon Smith Barney statement tracks your deductible and non-deductible IRA contributions based upon information you provided to your Financial Consultant. However, Salomon Smith Barney reports to the IRS only the total amount you contribute to your IRA.

	1999	1998
Contributions		
Total contributions	**$ 0.00**	**$ 0.00**

Primary Beneficiaries

Contact your Financial Consultant for the appropriate documen to change or update your beneficiary information.

JAMES A MCDERMOTT

KATHERINE E MCDERMOTT

Portfolio details

The values of your holdings are as of 12/31/99. Please note, unrealized gain/(loss) is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Money funds

Number of shares	Description	Current value	Accrued dividends	Annualized % divide Yield/Anticipated Income (annualized)
8,974.84	DREYFUS LIQUID ASSETS INC	$ 8,974.84		4.94 $ 443.35
Total money funds		**$ 8,974.84**	**$ 0.00**	4.93 $ 443.35

SALOMON SMITH BARNEY

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Preferred Client IRA Statement

December 1 - December 31, 1999

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JAMES A MCDERMOTT

Account number 443-65137-19 130

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Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
60	AMAZON COM INC	04/29/99	$ 5,101.15	$ 85.019	$ 76.125	$ 4,567.50	($ 533.65)	ST	
120	SYMBOL: AMZN	08/24/99	7,492.55	62.437	76.125	9,135.00	1,642.45	ST	
180			**12,593.70**	**69.965**		**13,702.50**	**1,108.80**		
120	BMC SOFTWARE INC	01/15/99	4,779.22	39.826	79.938	9,592.56	4,813.34	ST	
110	SYMBOL: BMCS/RATING: B+	01/15/99	4,380.95	39.826	79.938	8,793.18	4,412.23	ST	
230			**9,160.17**	**39.827**		**18,385.74**	**9,225.57**		
267.5406	CISCO SYS INC	01/10/97	4,035.41	15.138	107.125	28,660.29	24,624.88	LT	
246.2684	SYMBOL: CSCO/RATING: B+	01/10/97	3,721.39	15.111	107.125	26,381.50	22,660.11	LT	
8.955		02/05/97	125.37	14.00	107.125	959.30	833.93	LT	
4.4594		02/05/97	62.43	14.051	107.125	477.71	415.28	LT	
44.7766		05/01/97	524.88	11.722	107.125	4,796.69	4,271.81	LT	
572			**8,469.48**	**14.807**		**61,275.49**	**52,806.01**		
101	DELL COMPUTER CORP	07/28/97	990.54	9.807	51.00	5,151.00	4,160.46	LT	
112	SYMBOL: DELL/RATING: B	12/19/97	1,084.06	9.679	51.00	5,712.00	4,627.94	LT	
96		12/19/97	929.20	9.679	51.00	4,896.00	3,966.80	LT	
309			**3,003.80**	**9.721**		**15,759.00**	**12,755.20**		
160	EMC CORP-MASS SYMBOL: EMC/RATING: B	11/03/99	**12,130.11**	75.813	109.25	**17,480.00**	**5,349.89**	ST	
200	FEDERAL NATIONAL MORTGAGE ASSN SYMBOL: FNM/RATING: A	01/24/95	3,571.75	17.596	62.438	**12,487.60**	**8,915.85***	LT	1.729 216.00
180	HOME DEPOT INC SYMBOL: HD/RATING: A+ Stock split pending	08/10/99	**10,295.63**	54.187	103.125	**18,563.75**	**8,268.12**	ST	155 30.40
112	INTEL CORP	01/10/97	4,007.50	35.781	82.313	9,219.06	5,211.56	LT	
104	SYMBOL: INTC/RATING: A-	01/10/97	3,714.75	35.718	82.313	8,560.55	4,845.80	LT	
216			**7,722.25**	**35.751**		**17,779.61**	**10,057.36**		145 25.92
60	INTL BUSINESS MACHINES CORP	04/20/98	3,285.00	54.75	107.875	6,472.50	3,187.50	LT	
30	SYMBOL: IBM/RATING: B	04/20/98	1,642.50	54.75	107.875	3,236.25	1,593.75	LT	
30		10/27/99	2,821.88	94.062	107.875	3,236.25	414.37	ST	
120			**7,749.38**	**64.578**		**12,945.00**	**5,195.62**		444 57.60
94	LUCENT TECHNOLOGIES INC	09/03/98	3,650.56	38.835	75.00	7,050.00	3,399.44	LT	
41	SYMBOL: LU	09/03/98	1,592.27	38.835	75.00	3,075.00	1,482.73	LT	
28		09/30/98	964.25	34.437	75.00	2,100.00	1,135.75	LT	

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SALOMON SMITH BARNEY

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Ref: 00001085 00008431

Preferred Client IRA Statement

December 1 - December 31, 1999

JAMES A MCDERMOTT

Account number 443-65137-

Common stocks & options *continued*

Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipate Income (annual
24	LUCENT TECHNOLOGIES INC	09/30/98	$ 828.50	$ 34.437	$ 75.00	$ 1,800.00	$ 973.50	LT	
187	SYMBOL: LU		7,033.58	37.613		14,028.00	6,991.42		
									14
144	MEDTRONIC INC	01/10/97	2,533.50	17.593	36.438	5,247.07	2,713.57	LT	
136	SYMBOL: MDT/RATING: A	01/10/97	2,397.00	17.625	36.438	4,955.57	2,558.57	LT	
280			4,930.50	17.609		10,202.64	5,272.14		
									44.
160	MICROSOFT CORP	01/30/97	3,980.00	24.875	116.75	18,680.00	14,700.00	LT	
152	SYMBOL: MSFT/RATING: A-	01/30/97	3,781.00	24.875	116.75	17,746.00	13,965.00	LT	
312			7,761.00	24.875		36,426.00	28,665.00		
60	NOKIA CORP SPONSORED ADR	01/19/99	4,297.42	71.623	191.063	11,463.78	7,166.36	ST	
60	EACH REPSTG "A" SH	01/19/99	4,297.42	71.623	191.063	11,463.78	7,166.36	ST	
120	SYMBOL: NOK		8,594.84	71.624		22,927.56	14,332.72		
									64.
200	ORACLE CORP SYMBOL: ORCL/RATING: B+	12/14/99	15,398.00	76.99	112.063	22,412.60	7,014.60	ST	
60	QUALCOMM INC SYMBOL: QCOM/RATING: B Stock split pending	09/24/99	11,376.27	189.604	704.50	42,270.00	30,893.73	ST	
270	SIEBEL SYSTEMS INC SYMBOL: SEBL	10/18/99	11,134.53	41.239	84.00	22,680.00	11,545.47	ST	
186	STARBUCKS CORP	01/10/97	2,836.50	15.25	24.25	4,510.50	1,674.00	LT	
176	SYMBOL: SBUX	01/10/97	2,706.00	15.375	24.25	4,268.00	1,562.00	LT	
40		07/02/99	1,092.50	27.312	24.25	970.00	(122.50)	ST	
402			6,635.00	16.505		9,748.50	3,113.50		
290	XILINX INC SYMBOL: XLNX/RATING: B+	11/16/99	13,048.04	44.993	45.469	13,186.01	137.97	ST	-

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Preferred Client IRA Statement
December 1 - December 31, 1999 4g

JAMES A MCDERMOTT

Account number 443-65137-19 130

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Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
67	YAHOO INC SYMBOL: YHOO	10/14/99	$ 11,429.60	$ 170.591	$ 432.688	$ 28,990.10	$ 17,560.50	ST	
Total common stocks and options			$ 172,037.83			$ 412,277.10	$ 106,759.24	ST	.11
							$ 133,480.23	LT	$ 454.60
Total portfolio value			$ 181,012.47			$ 421,251.94	$ 106,759.24	ST	.21
							$ 133,480.23	LT	$ 897.95

*Based on information supplied by client, not verified by Salomon Smith Barney.

Transaction details

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vity

Date	Activity	Description	Quantity	Price	Amount
12/17/99	Bought	ORACLE CORP SALOMON SMITH BARNEY	200	$ 76.99	$ -15,398.00
12/31/99	Stk split	XILINX INC STK SPLIT ON 145 SHS	145		0.00
Total securities bought and other subtractions					$ -15,398.00
Total securities sold and other additions					$ 0.00

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Opening money funds balance $ 24,228.77

Date	Activity	Description	Amount
12/02/99	Autoinvest	DREYFUS LIQUID ASSETS INC	118.27
12/13/99	Autoinvest	DREYFUS LIQUID ASSETS INC	14.40

All transactions are traded at $1.00 per share.

Date	Activity	Description	Amount
12/17/99	Redemption	DREYFUS LIQUID ASSETS INC	-15,386.60
		Closing balance	$ 8,974.84

Earnings details

*The tax status of earnings is reliable to the best of our knowledge. **Taxable** and **non-taxable** designations refer to the federal income tax status of your securities, not of your account.*

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Date	Description	Comment		Taxable	Non-taxable	Amount
12/01/99	INTEL CORP	CASH DIV ON	216.0000 SHS	$ 6.48		$ 6.48
12/01/99	LUCENT TECHNOLOGIES INC	CASH DIV ON	187.0000 SHS	3.74		3.74
12/10/99	INTL BUSINESS MACHINES CORP	CASH DIV ON	120.0000 SHS	14.40		14.40
12/16/99	HOME DEPOT INC	CASH DIV ON	190.0000 SHS	11.40		11.40
Total dividends earned				$ 36.02	$ 0.00	$ 36.02

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SALOMON SMITH BARNEY

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Ref: 00001085 00006433

Preferred Client IRA Statement

December 1 - December 31, 1999 4h

Page

JAMES A MCDERMOTT

Account number 443-65137-

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amc
12/01/99	DREYFUS LIQUID ASSETS INC	CASH DIV RECORD 11/30/99 PAY 11/30/99	$ 108.05		$ 108
Total earnings from money funds			**$ 108.05**	**$ 0.00**	**$ 108**

We have available at no cost brochures describing our investment advisory services and those of any other investment advisors managing your acco
If you would like copies, please ask your Salomon Smith Barney Financial Consultant or Salomon Smith Barney Portfolio Manager.

Message: *Please note that Salomon Smith Barney is required by law to report the December 31, 1999 Fair Market Value of this account to the Internal Revenue Service. Salomon Smith Barney will forward this information to the IRS on or before May 31, 2000 on IRS Form 5498.*

Your Performance Monitor, reviewing your managed account, is normally available within 30 days of the end of the quarter This monitor includes a description of your portfolio performance, an asset allocation summary and other details concerning your investments. For further information on the monitor, please contact your Financial Consultant.

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SALOMON SMITH BARNEY

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Preferred Client IRA Statement

June 1 - June 30, 1999

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443F991306513600000185 299181AO01 PCAFL013A
JAMES A MCDERMOTT
SSB IRA ROLLOVER CUSTODIAN
[redacted]

SALOMON SMITH BARNEY INC.
Your Financial Consultant
[redacted]
Preferred Client Service Center. 800-232-4454

Account number 443-65136-10 130

Account value

	Last period	This period	%
Money funds	$ 3,425.70	$ 0.00	
Common stocks & options	125,674 64	0 00	
Net value	**$ 129,100.34**	**$ 0.00**	**100**

Fair Market Value 12/31/98 $ 120,382 22

Earnings summary

	This period	This year
Dividends	$ 19.16	$ 235 42
Money funds earnings	11 02	53 21
Total	$ 30 18	$ 288 63

Additional summary information

	This period	This year
FRGN tax withheld	$ 0.00	$ 11.01

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 15,040.88	$ 17,131 74 LT $ 1,383 75 ST
Unrealized gain or (loss)	0 00	*Not applicable*

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Preferred Client IRA Statement
June 1 - June 30, 1999

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JAMES A MCDERMOTT

Account number 443-65136-10 130

Cash and money funds balance

	This period	This year
Opening balance	$ 3,425.70	
Securities bought and other subtractions	0.00	
Securities sold and other additions	25,211.09	
Deposits	98.68	98.68
Withdrawals	-28,765.65	-29,846.35
Dividends credited	19.16	
Money funds earnings credited	11.02	
Closing balance	$ 0.00	

Portfolio summary

	This period	Year-to-date
Opening value of securities	129,100.34	120,382.22
+ Opening cash balance	0.00	0.00
= Opening portfolio balance	129,100.34	120,382.22
Securities deposited/withdrawn net	-101,027.95	-101,027.95
Capital deposited/withdrawn net	-28,666.97	-29,747.67
Adjusted opening value	-594.58	-10,393.40
Closing value of securities	0.00	0.00
+ Closing cash balance	0.00	0.00
= Closing portfolio value	0.00	0.00

Note. Securities deposited/withdrawn net = The value of securities on the day they were debited from or credited to the account as reflected in the "Other security activity" section.
Capital deposited/withdrawn net = Cash withdrawals and deposits, credit card payments, FMA Card activity, checks written, and Money funds/Insured Deposit Account℠ transfers.

IRA activity summary

For your convenience the Salomon Smith Barney statement tracks your deductible and non-deductible IRA contributions based upon information you provided to your Financial Consultant. However, Salomon Smith Barney reports to the IRS only the total amount you contribute to your IRA.

	1999	1998
Contributions		
Total contributions	$ 0.00	$ 0.00

Primary Beneficiaries

Contact your Financial Consultant for the appropriate documentation to change or update your beneficiary information.

JAMES A C MCDERMOTT

KATHERINE E MCDERMOTT

Transaction details

Date	Activity	Description	Quantity	Price	Amount
06/02/99	Stk split	INTL BUSINESS MACHINES CORP STK SPLIT ON 30 SHS	30		$ 0.00
06/14/99	Sold	AMERICAN EXPRESS CO SALOMON SMITH BARNEY	-150	125.25	18,786.87
06/14/99	Sold	INTL BUSINESS MACHINES CORP	-30	118.875	3,566.13
06/14/99	Sold	LUCENT TECHNOLOGIES INC	-47	60.812	2,858.09
Total securities bought and other subtractions					**$ 0.00**
Total securities sold and other additions					**$ 25,211.09**

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JAMES A MCDERMOTT

Account number 443-65136-10 130

Other Security Activity

Date	Activity	Description	Quantity	Value
06/15/99	Adjustment	ALTERA CORP FROM 443 65136-01 TO 443-65137-01 IRA ADJUSTMENT	160	$ 5,940 00
06/15/99	Adjustment	BMC SOFTWARE INC FROM 443 65136 01 TO 443 65137-01 IRA ADJUSTMENT	-110	-5,046.25
06/15/99	Adjustment	CISCO SYS INC FROM 443 65136-01 TO 443-65137-01 IRA ADJUSTMENT	-150	-16,678 20
06/15/99	Adjustment	DELL COMPUTER CORP FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-312	-10,803.00
06/15/99	Adjustment	INTEL CORP FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-104	-5,791.55
06/15/99	Adjustment	INTL BUSINESS MACHINES CORP FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-30	-3,476.25
06/15/99	Adjustment	LUCENT TECHNOLOGIES INC FROM 443 65136 01 TO 443 65137-01 IRA ADJUSTMENT	-65	-3,798.47
06/15/99	Adjustment	MEDTRONIC INC FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-68	-4,951.28
06/15/99	Adjustment	MICROSOFT CORP FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-152	-11,808.57
06/15/99	Adjustment	NOKIA CORP SPONSORED ADR EACH REPSTG "A" SH FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-60	-4,920.00

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Preferred Client IRA Statement
June 1 - June 30, 1999

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ef: 00000185 00003814

JAMES A MCDERMOTT

Account number 443-65136-10 130

Other Security Activity *continued*

Date	Activity	Description	Quantity	Value
06/15/99	Adjustment	PAYCHEX INC FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-150	$ -4,153.20
06/15/99	Adjustment	PFIZER INC FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-30	-2,926.89
06/15/99	Adjustment	SAP AKLENGESELLSCHAFT SPONS ADR-USD FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-170	-5,461.25
06/15/99	Adjustment	STAPLES INC FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-186	-5,080.21
06/15/99	Adjustment	STARBUCKS CORP FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-176	-6,457.08
06/15/99	Adjustment	WASHINGTON MUTUAL INC FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT	-102	-3,735.75
Net value of securities deposited/withdrawn				**$ -101,027.85**

eposits

Date	Description	Amount
06/18/99	INVESTMENT AND MGMT SERVICES FROM 06/15/99 TO 06/30/99	98.68

Date	Description	Amount

/ithdrawals

Date	Description	Reference no	Amount
06/21/99	FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT		98.68

Date	Description	Reference no	Amount
06/21/99	FROM 443-65136-01 TO 443-65137-01 IRA ADJUSTMENT		28,666.97
	Total withdrawals		**$ 28,765.65**

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Preferred Client IRA Statement
June 1 - June 30, 1999

4m

JAMES A MCDERMOTT

Account number 443-65136-10 130

Money funds activity

Opening money funds balance			$ 3,425.70
Date	Activity	Description	Amount
06/02/99	AutoInvest	DREYFUS LIQUID ASSETS INC	16.38
06/11/99	AutoInvest	DREYFUS LIQUID ASSETS INC	13.80
06/15/99	AutoInvest	DREYFUS LIQUID ASSETS INC	25,211.09

All transactions are traded at $1.00 per share

Date	Activity	Description	Amount
06/21/99	AutoInvest	DREYFUS LIQUID ASSETS INC	98.68
06/21/99	Redemption	DREYFUS LIQUID ASSETS INC	-28,765.65
		Closing balance	**$ 0.00**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
06/01/99	INTEL CORP	CASH DIV ON 104.0000 SHS	$ 3.12		$ 3.12
06/01/99	LUCENT TECHNOLOGIES INC	CASH DIV ON 112.0000 SHS	2.24		2.24
06/10/99	INTL BUSINESS MACHINES CORP	CASH DIV ON 30.0000 SHS	7.20		7.20
06/10/99	PFIZER INC	CASH DIV ON 30.0000 SHS	6.60		6.60
Total dividends earned			**$ 19.16**	**$ 0.00**	**$ 19.16**

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
06/01/99	DREYFUS LIQUID ASSETS INC	CASH DIV RECORD 05/31/99 PAY 05/31/99	$ 11.02		$ 11.02
Total earnings from money funds			**$ 11.02**	**$ 0.00**	**$ 11.02**

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor. Trades are allocated using the FIFO (first in-first out) method. Day traders should therefore not rely on this section for day trading results. The Gain/Loss details section does not reflect fractional shares or cash paid in lieu of fractional shares but rather reduces the cost basis of the security involved. This reduction is not reflected as a Realized transaction.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
AMERICAN EXPRESS CO SALOMON SMITH BARNEY	03/12/96	06/09/99 Sold	150	$ 44.624	$ 125.25	$ 6,702.65	$ 18,786.87	$ 12,084.22 * LT
INTL BUSINESS MACHINES CORP	04/20/98	06/09/99 Sold	30	54.75	118.875	1,642.50	3,566.13	1,923.63 LT

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SALOMON SMITH BARNEY

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Preferred Client IRA Statement

June 1 - June 30, 1999

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JAMES A MCDERMOTT

Account number 443-65136-10 130

·alized ·in or loss ·tinued

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
LUCENT TECHNOLOGIES INC	09/03/98	06/09/99 Sold	47	$ 38.835	$ 60.812	$ 1,825.28	$ 2,858.09	$ 1,032.81 ST
Total Long Term this period								$ 14,007.85
Total Short Term this period								$ 1,032.81
Total realized gain or (loss) - this period						$ 10,170.43	$ 25,211.09	$ 15,040.66
Total Long Term - year-to-date								$ 17,131.74
Total Short Term - year-to-date								$ 1,383.75
Total realized gain or (loss) - year-to-date						$ 14,493.54	$ 33,009.03	$ 18,515.49

*Based on information supplied by client, not verified by Salomon Smith Barney.

Message: *For certain exceptionally volatile securities, particularly shares of "Internet companies," investors run the risk of receiving an execution that is substantially different from the last or quoted price. In this environment, it is important to know your option to place a "limit order" or "market order," and the benefits and risks of each type of order. Additional risks may be incurred by day trading or trading such securities on margin. Your Financial Consultant is available to discuss these issues with you, or you can visit our website at www.smithbarney.com*

*At Salomon Smith Barney, we believe that our clients' trust is our most important asset. Because we know that the information you share with us is important to you, we have enclosed a pamphlet, **Privacy Protection at Salomon Smith Barney**, featuring **The Citigroup Privacy Promise for Consumers**. Please review this enclosure for details on how your personal information is protected.*

Your Salomon Smith Barney Performance Monitor, reviewing your managed account, is normally available within 30 days of the end of the quarter. This monitor includes a description of your portfolio returns, an asset allocation summary and other details concerning your investments. For further information on the monitor, please contact your Financial Consultant.

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SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Janus Twenty Fund (See attached pg 5a)	Purchase	1/1 - 12/31/99	$1,001 - $15,000
SP	SSB Separate Property (519-35651-15 144) (See attached pg 5b-5f)	Purchase	1/1 - 12/31/99	$1,001 - $15,000
	SSB IRA Custodian (443-65137-19 130) (See attached pg 5g-5m)	Purchase	1/1 - 12/31/99	$100,001 - $250,000
	SSB IRA Custodian (443-65137-19 130) (See attached pg 5g-5m)	Sold	1/1 - 12/31/99	$50,001 - $100,000
	SSB IRA Rollover Custodian (443-65136-10 130) (See attached pg 5n-5o)	Purchase	1/1 - 6/30/99	$1,001 - $15,000
	SSB IRA Rollover Custodian (443-65136-10 130) (See attached pg 5n-5o)	Sold	1/1 - 6/30/99	$15,001 - $50,000
	Stamps.com	Purchase	6/25/99	$1,001 - $15,000
SP	SSB IRA Custodian (519-65946-17 144) (See attached pg 5p)	Purchase	1/15/99	$1,001 - $15,000

JANUS

1999 YEAR-END INVESTMENT REPORT

January 1, 1999 - December 31, 1999

FUND SUMMARY

	Beginning Value 1/1/1999	Additions*	Withdrawals*	Change in Investment Value*	Ending Value 12/31/1999
NON-RETIREMENT					
THERESE HANSEN					
Acct. # 203235484					
43-Janus Twenty Fund	$0 00	$2,500 00	$0 00	$944 24	$3,444 24
NON-RETIREMENT TOTAL	$0 00	$2,500 00	$0 00	$944 24	$3,444 24

TRANSACTION DETAIL

	Date	Transaction Description	Number of Shares	X	Price / Share	=	Dollar Amount	Share Balance
NON-RETIREMENT								
THERESE HANSEN								
Acct. # 203235484								
43-Janus Twenty Fund	1/1/1999	Beginning Balance	0 000		$53 30		$0 00	0 000
	3/4/1999	Shares Purchased	8 746		$57 17		$500.00	8 746
	3/22/1999	Automatic Purchase -ACH	3 180		$62 90		$200 00	11 926
	4/20/1999	Automatic Purchase -ACH	3 225		$62 02		$200 00	15 151
	5/20/1999	Automatic Purchase -ACH	3 202		$62 46		$200.00	18 353
	6/21/1999	Automatic Purchase -ACH	3 191		$62 68		$200 00	21 544
	7/20/1999	Automatic Purchase -ACH	3 145		$63 60		$200 00	24.689
	8/20/1999	Automatic Purchase -ACH	3 294		$60 71		$200 00	27 983
	9/20/1999	Automatic Purchase -ACH	3 125		$64 01		$200 00	31 108
	10/20/1999	Automatic Purchase -ACH	3 062		$65 32		$200 00	34 170
	11/22/1999	Automatic Purchase -ACH	2 648		$75 53		$200 00	36 818
	12/10/1999	Income Reinvest 18886	0 087		$79 80		$6 95	36 905
	12/10/1999	20% Rate Gn Reinv 4 07975	1 882		$79 80		$150 21	38 787
	12/20/1999	Automatic Purchase -ACH	2 496		$80 14		$200 00	41 283
	12/31/1999	Ending Balance	41 283		$83 43		$3,444 24	41 283

*Additions represent purchases, transfers and exchanges into accounts within your portfolio Withdrawals represent redemptions, transfers and exchanges, as well as cash dividend and cash capital gains distributions, out of accounts within your portfolio Change in Investment Value represents the appreciation or depreciation of your investment as well as dividend and capital gain distributions

Please retain for your records Janus Distributors, Inc is a Distributor for the Funds and acts as Agent

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2932

SALOMON SMITH BARNEY

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Client Statement

January 1 - January 31, 1999 5b

Ref: 00001864 00006911

519A99144356510000018 64 299029AO01 CPGFO097A
THERESE HANSEN
SEPERATE PROPERTY
[redacted]

SALOMON SMITH BARNEY INC.
Your Financial Consultant
[redacted]

Account number 519-35651-15 14

Account value

	Last period	This period
Cash balance	$ 1.13	$ 0.00
Money funds	0.00	1,000.00
Mutual funds	1,521.04	3,120.58
Net value	$ 1,622.17	$ 4,120.58

Cash and money funds balance

	This period
Opening balance	$ 1.13
Securities bought and other subtractions	-1,501.13
Securities sold and other additions	0.00
Deposits	2,500.00
Closing balance	$ 1,000.00

Portfolio details

The values of your holdings are as of 01/29/99.

Money funds

Description	No. of shares	Market value	Accrued dividends	Annualized Dividend Yield	Comment
SB MONEY FUNDS CASH PORT CL A	1,000.00	$ 1,000.00		4.57%	
Total money funds		$ 1,000.00	$ 0.00		

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SALOMON SMITH BARNEY

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Ref: 00001864 00006912

Client Statement

January 1 - January 31, 1999 5c

THERESE HANSEN

Account number 519-35651-15 1

Mutual funds

Description	Number of shares	Price	Dividend yield	Anticipated income (annualized)	Market value	Comment
ALLIANCE GROWTH FUND CL B	74	$ 42.17	.023%	$ .73	$ 3,120.58	
Total mutual funds				**$ .73**	**$ 3,120.58**	

Anticipated annual income

This value is a grand total of all the anticipated annual income amounts that are shown on the statement.

Total anticipated income (annualized)	**$ .73**

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
01/15/99	Bought	ALLIANCE GROWTH FUND CL B CONFIRM #003225114 DIVIDENDS REINVEST TRADE AS OF 01/12/99	36.462	$ 41.17	$ -1,501.13
Total securities bought and other subtractions					**$ -1,501.13**
Total securities sold and other additions					**$ 0.00**

Deposits

Date	Description	Amount
01/11/99	DEPOSIT RECEIVED AT 00519 - SEATTLE RETAIL	1,500.00
01/28/99	DEPOSIT RECEIVED AT 00519 - SEATTLE RETAIL	1,000.00
	Total deposits	**$ 2,500.00**

Money funds activity

Opening money funds balance **$ 0.00**

Date	Activity	Description	Amount
01/15/99	Investment	SB MONEY FUNDS CASH PORT CL A	1,501.13
01/15/99	Redemption	SB MONEY FUNDS CASH PORT CL A	-1,501.13

All transactions are traded at $1.00 per share.

Date	Activity	Description	Amount
01/29/99	AutoInvest	SB MONEY FUNDS CASH PORT CL A	1,000.00
		Closing balance	**$ 1,000.00**

Message: *What's ahead in 1999? In our special report, **Top Picks for 1999**, you'll read about the key themes and evolving trends our research team foresees for the equity markets, as well as which stocks our analysts pick to outperform their industry groups. To receive a copy of **Top Picks for 1999**, call your Financial Consultant. You may also review the report on our website, www.smithbarney.com.*

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SALOMON SMITH BARNEY

A Member of TravelersGroup

Ref: 00001715 00006379

Client Statement

February 1 - February 28, 1999 5d

THERESE HANSEN

Account number 519-35651-15 14

Anticipated annual income

This value is a grand total of all the anticipated annual income amounts that are shown on the statement.

Total anticipated income (annualized)	$ .97

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
02/02/99	Bought	ALLIANCE GROWTH FUND CL B CONFIRM #003235488 DIVIDENDS REINVEST TRADE AS OF 01/28/99	23.964	$ 41.73	$ -1,000.00
Total securities bought and other subtractions					$ -1,000.00
Total securities sold and other additions					$ 0.00

Money funds activity

	Opening money funds balance		$ 1,000.00
Date	Activity	Description	Amount
02/02/99	Redemption	SB MONEY FUNDS CASH PORT CL A	-1,000.00

All transactions are traded at $1 00 per share.

Date	Activity	Description	Amount
		Closing balance	$ 0.00

Money funds earnings

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Date	Description	Comment	Taxable	Non-taxable	Amount
02/02/99	SB MONEY FUNDS CASH PORT CL A	ACCRUED DIVIDEND	$ .24		$ .24
Total earnings from money funds			$ .24	$ 0.00	$ .24

Message: *Don't delay! The deadline for 1998 traditional and Roth IRA contributions is April 15. You may also wish to consider boosting your IRA savings even more by contributing for both 1998 and 1999. Your Financial Consultant can provide eligibility details and a personalized IRA analysis. Call today*

2935

SALOMON SMITH BARNEY

Ref: 00001715 00006378

A Member of TravelersGroup

Client Statement

February 1 - February 28, 1999 5e

519B991443565100000171 5 299057AO01 CPGFO097A
THERESE HANSEN
SEPERATE PROPERTY
[redacted]

SALOMON SMITH BARNEY INC.
Your Financial Consultant
[redacted]

Account number 519-35651-15 14

Account value

	Last period	This period
Cash balance	$ 0.00	$ .24
Money funds	1,000.00	0.00
Mutual funds	3,120.58	3,934.23
Net value	**$ 4,120.58**	**$ 3,934.47**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Money funds earnings	$ .24	$ .24	$ 0.00
Total	$ .24	$ .24	$ 0.00

Cash and money funds balance

	This period
Opening balance	$ 1,000.00
Securities bought and other subtractions	-1,000.00
Securities sold and other additions	0.00
Deposits	0.00
Money funds earnings credited	.24
Closing balance	$ .24

Portfolio details

The values of your holdings are as of 02/26/99.

Mutual funds

Description	Number of shares	Price	Dividend yield	Anticipated income (annualized)	Market value	Comment
ALLIANCE GROWTH FUND CL B	97.964	$ 40.16	.024%	$ .97	$ 3,934.23	
Total mutual funds				$ .97	$ 3,934.23	

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SALOMON SMITH BARNEY

Ref. 00001715 00006379

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Client Statement

February 1 - February 28, 1999 5f

THERESE HANSEN

Account number 519-35651-15 144

Anticipated annual income

This value is a grand total of all the anticipated annual income amounts that are shown on the statement

Total anticipated income (annualized)	$ 87

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
02/02/99	Bought	ALLIANCE GROWTH FUND CL B CONFIRM #003235488 DIVIDENDS REINVEST TRADE AS OF 01/28/99	23.964	$ 41.73	$ -1,000.00
Total securities bought and other subtractions					$ -1,000.00
Total securities sold and other additions					$ 0.00

Money funds activity

Opening money funds balance $ 1,000.00

All transactions are traded at $1.00 per share.

Date	Activity	Description	Amount
02/02/99	Redemption	SB MONEY FUNDS CASH PORT CL A	-1,000.00

Date	Activity	Description	Amount
		Closing balance	$ 0.00

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
02/02/99	SB MONEY FUNDS CASH PORT CL A	ACCRUED DIVIDEND	$ .24		$ .24
Total earnings from money funds			$ .24	$ 0.00	$ .24

Message: *Don't delay! The deadline for 1998 traditional and Roth IRA contributions is April 15. You may also wish to consider boosting your IRA savings even more by contributing for both 1998 and 1999. Your Financial Consultant can provide eligibility details and a personalized IRA analysis. Call today.*

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Ref: 00000920 00011468

Quarterly Review

First Quarter 1999

MCDERMOTT JAMES A
443-65137-19 130
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Purchases

Quantity	Description	Unit Cost	Total Cost	Date of Purchase
Common Stocks				
120	BMC SOFTWARE INC	$ 39.827	$ 4,779.22	1/15/99
30	*** NOKIA CORP SPONSORED ADR	143.247	4,297.42	1/19/99
160	*** SAP AKLENGESELLSCHAFT	32.467	5,194.75	2/05/99
Subtotal			$ 14,271.39	
Total Purchases			$ 14,271.39	

Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
144	BARNES & NOBLE INC	$ 27.005	$ 3,888.77	$ 38.60	$ 5,558.96	$ 1,670.19	2/01/99
80	STAPLES INC	8.977	718.20	28.10	2,247.94	1,529.74	2/11/99
30	STARBUCKS CORP	15.250	457.50	28.75	862.47	404.97	3/24/99
Subtotal			$ 5,064.47		$ 8,669.37	$ 3,604.90	
Total Sales			$ 5,064.47		$ 8,669.37	$ 3,604.90	

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Contributions and Withdrawals

	Date	Quantity	Description	Value
Security Addition				
	06/15/99	60	*** NOKIA CORP SPONSORED ADR	$ 4,920.00
	06/15/99	150	PAYCHEX INC	4,153 20
	06/15/99	30	PFIZER INC	2,926 89
	06/15/99	170	*** SAP AKLENGESELLSCHAFT	5,461.25
	06/15/99	186	STAPLES INC	5,080 21
	06/15/99	176	STARBUCKS CORP	6,457.08
	06/15/99	102	WASHINGTON MUTUAL INC	3,735 75
Subtotal				$ 101,027.95
Total Addition				$ 129,793.60
Cash Withdrawal				
	04/16/99		INVESTMENT AND MGMT SERVICES	-578 85
Total Contributions and Withdrawals				$ 129,214.75

Purchases

Quantity	Description	Unit Cost	Total Cost	Date of Purchase
Common Stocks				
30	AMAZON COM INC	$ 170.038	$ 5,101.15	4/29/99
Total Purchases			$ 5,101.15	

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Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
20	ALTERA CORP	$ 39.750	$ 795.00	$ 74.50	$ 1,489.95	$ 694.95	4/20/99
7	INTL BUSINESS MACHINES CORP	109.500	766.50	167.99	1,175.94	409.44	4/20/99
Subtotal			**$ 1,561.50**		**$ 2,665.89**	**$ 1,104.39**	
Total Sales			**$ 1,561.50**		**$ 2,665.89**	**$ 1,104.39**	

Glossary of Market Indices

Consumer Price Index

A measure of the average change in prices over time in a fixed market basket of goods and services. The index is for all U.S. urban consumers, which covers approximately 80% of the noninstitutionalized civilian population.

Lipper Growth Funds Average

An average of all funds which normally invest in companies whose long-term earnings are expected to grow significantly faster than the earnings of the stocks represented in the major unmanaged stock indices

Standard & Poor's 500 Index

Tracks the total return of 500 of the largest stocks (400 industrial, 40 utility, 20 transportation and 40 financial companies) in the United States, which represent about 78% of the New York Stock Exchange's total market capitalization The return of each stock is weighted on the basis of the stock's capitalization.

Dividends and Interest Received

	Date	Quantity	Description	Amount
Cash and Short Term Investments				
Subtotal				$ 199.29
Total Dividends and Interest Received				$ 383.61

Contributions and Withdrawals

	Date	Quantity	Description	Value
Cash Addition				
	08/03/99		FROM 443-65136-01	$ 27.34
Cash Withdrawal				
	07/16/99		INVESTMENT AND MGMT SERVICES	-1,244.93
Total Contributions and Withdrawals				$ -1,217.59

Purchases

Quantity	Description	Unit Cost	Total Cost	Date of Purchase
Common Stocks				
40	STARBUCKS CORP	$ 27.313	$ 1,092.50	7/02/99
355	QWEST COMMUNICATIONS INTL	31.750	11,271.25	7/22/99
190	HOME DEPOT INC	54.188	10,295.63	8/10/99
60	AMAZON COM INC	124.876	7,492.55	8/24/99

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Ref: 00000966 00012448

Quarterly Review

Third Quarter 1999

MCDERMOTT JAMES A
443-65137-19 130
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Purchases

Quantity	Description	Unit Cost	Total Cost	Date of Purchase
60	QUALCOMM INC	$ 189.605	$ 11,376.27	9/24/99
Subtotal			**$ 41,528.20**	
Total Purchases			**$ 41,528.20**	

Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
377	STAPLES INC	$ 8.910	$ 3,359.19	$ 24.78	$ 9,343.81	$ 5,984.62	8/13/99
355	QWEST COMMUNICATIONS INTL	31.750	11,271.25	29.29	10,397.58	-873.67	9/23/99
205	WASHINGTON MUTUAL INC	38.100	7,810.70	29.03	5,950.56	-1,860.14	9/23/99
Subtotal			**$ 22,441.14**		**$ 25,691.95**	**$ 3,250.81**	
Total Sales			**$ 22,441.14**		**$ 25,691.95**	**$ 3,250.81**	

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Contributions and Withdrawals

	Date	Quantity	Description	Value
Cash Addition				
	11/22/99		FROM 443 65136 01	$ 3.96
Cash Withdrawal				
	10/15/99		INVESTMENT AND MGMT SERVICES	1,283.82
Total Contributions and Withdrawals				**$ -1,279.86**

Purchases

Quantity	Description	Unit Cost	Total Cost	Date of Purchase
Common Stocks				
67	YAHOO INC	$ 170.591	$ 11,429.60	10/14/99
135	SIEBEL SYSTEMS INC	82.478	11,134.53	10/18/99
30	INTL BUSINESS MACHINES CORP	94.063	2,821.88	10/27/99
160	EMC CORP MASS	75.813	12,130.11	11/03/99
145	XILINX INC	89.986	13,048.04	11/16/99
200	ORACLE CORP	76.990	15,398.00	12/14/99
Subtotal			**$ 65,962.16**	
Total Purchases			**$ 65,962.16**	

Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
210	PFIZER INC	$ 36.707	$ 7,708.47	$ 37.77	$ 7,931.72	$ 223.25	10/14/99
330	*** SAP AKLENGESELLSCHAFT	31.381	10,355.73	36.05	11,895.14	1,539.41	10/15/99
312	PAYCHEX INC	14.629	4,564.45	38.26	11,936.84	7,372.39	10/22/99
314	ALTERA CORP	19.970	6,270.60	49.16	15,437.32	9,166.72	10/29/99
339	DELL COMPUTER CORP	9.807	3,324.70	41.43	14,046.33	10,721.63	11/10/99
Subtotal			$ 32,223.95		$ 61,247.35	$ 29,023.40	
Total Sales			$ 32,223.95		$ 61,247.35	$ 29,023.40	

Glossary of Market Indices

Consumer Price Index

A measure of the average change in prices over time in a fixed market basket of goods and services. The index is for all U.S. urban consumers, which covers approximately 80% of the noninstitutionalized civilian population.

Lipper Growth Funds Average

An average of all funds which normally invest in companies whose long-term earnings are expected to grow significantly faster than the earnings of the stocks represented in the major unmanaged stock indices.

Standard & Poor's 500 Index

Tracks the total return of 500 of the largest stocks (400 industrial, 40 utility, 20 transportation and 40 financial companies) in the United States, which represent about 78% of the New York Stock Exchange's total market capitalization. The return of each stock is weighted on the basis of the stock's capitalization.

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Quarterly Review

First Quarter 1999

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Purchases

Quantity	Description	Unit Cost	Total Cost	Date o Purchas
Common Stocks				
110	BMC SOFTWARE INC	$ 39.827	$ 4,380.95	1/15/9
30	*** NOKIA CORP SPONSORED ADR	143.247	4,297.42	1/19/9
170	*** SAP AKTIENGESELLSCHAFT	30.359	5,160.98	2/12/9
Subtotal			$ 13,839.35	
Total Purchases			$ 13,839.35	

Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
64	BARNES & NOBLE INC	$ 27.912	$ 1,786.42	$ 38.60	$ 2,470.64	$ 684.22	2/01/99
70	STAPLES INC	8.906	623.44	28.10	1,966.94	1,343.50	2/11/99
30	STARBUCKS CORP	15.375	461.25	28.75	862.47	401.22	3/24/99
Subtotal			$ 2,871.11		$ 5,300.05	$ 2,428.94	
Total Sales			$ 2,871.11		$ 5,300.05	$ 2,428.94	

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Quarterly Review

Second Quarter 1999

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Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
20	ALTERA CORP	$ 39.750	$ 795.00	$ 74.50	$ 1,489.95	$ 694.95	4/20/99
6	INTL BUSINESS MACHINES CORP	109.500	657.00	167.99	1,007.94	350.94	4/20/99
150	AMERICAN EXPRESS CO	44.684	6,702.65	125.25	18,786.87	12,084.22	6/09/99
30	INTL BUSINESS MACHINES CORP	54.750	1,642.50	118.87	3,566.13	1,923.63	6/09/99
47	LUCENT TECHNOLOGIES INC	38.835	1,825.28	60.81	2,858.09	1,032.81	6/09/99
Subtotal			$ 11,622.43		$ 27,708.98	$ 16,086.55	
Total Sales			$ 11,622.43		$ 27,708.98	$ 16,086.55	

SALOMON SMITH BARNEY

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Ref: 00002194 00006759

Individual Retirement Account

January 1 - January 31, 1999

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THERESE HANSEN

Account number 519-65946-17 1

Mutual funds *continued*

Description	Number of shares	Price	Dividend yield	Anticipated income (annualized)	Market value	Comment
ALLIANCE GROWTH FUND CL B	488.49	$ 42.17	.023%	$ 4.88	$ 20,599.62	
SOGEN INTERNATIONAL FUND	231.222	22.71	10.70	561.86	5,251.05	
Total mutual funds				**$ 676.74**	**$ 52,200.70**	

Anticipated annual income

This value is a grand total of all the anticipated annual income amounts that are shown on the statement.

Total anticipated income (annualized)	**$ 813.74**

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
01/15/99	Bought	AIM VALUE FUND CL B CONFIRM #005837042 DIVIDENDS REINVEST	52.228	$ 39.33	$ -2,054.13
Total securities bought and other subtractions					**$ -2,054.13**
Total securities sold and other additions					**$ 0.00**

Other security activity

Date	Activity	Description	Quantity	Value
01/13/99	Adjustment	PR YR CONTR UNSP 98 FOR 98 ADJUSTMENT OF 500.00		
01/13/99	Adjustment	PR YR UNIDENTIFIED DEPOSIT ADJUSTMENT OF -500.00		
Net value of securities deposited/withdrawn				**$ 0.00**

Deposits

Date	Description	Amount
01/11/99	DEPOSIT RECEIVED AT 00519 - SEATTLE RETAIL CURRENT YEAR CONTRIBUTION	2,000.00

Date	Description	Amount

Money funds activity

Opening money funds balance **$ 54.06**

Date	Activity	Description	Amount
01/12/99	AutoInvest	SB MONEY FUNDS CASH PORT CL A	2,000.00
01/15/99	Redemption	SB MONEY FUNDS CASH PORT CL A	-2,054.12

All transactions are traded at $1.00 per share.

Date	Activity	Description	Amount
01/19/99	AutoInvest	SB MONEY FUNDS CASH PORT CL A	1.56
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	.06
		Closing balance	**$ 1.56**

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SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 8-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Conference of Indian (CII); Participate in CII Partnership Summit 1999	1/6/99-1/12/99	IAD-Bombay-Jaipur-Bombay-Delhi	Y	Y	N	N/A
International Management & Development Institute, US-German Roundtables for the 21st Century	1/12/99-1/16/99	Delhi, India-Berlin, Germany-SEA	Y	Y	N	N/A
International AIDS Vaccine Initiative (Discussion of "US Consultation on a Global AIDS Vaccine Initiative"	2/1/99-2/2/99	N/A	Y	Y	N	N/A
Confederation of Indian Industry (CII) Conference, Building a Worldwide Movement for Democracy	2/12/99-2/20/99	IAD-London-Delhi-Agra-Delhi-Mumbai-London-IAD	Y	Y	N	N/A
The Human Rights Project, Inc. (Meetings with the Tibetan Exiles)	3/27/99-3/30/99	IAD-Delhi & Dharamsala, India	Y	Y	N	N/A
Western States Caucus, Democratic National Committee, 1999 Annual Spring Conference	5/15/99	SEA-PDX-SEA	N	Y	N	N/A
United Methodist Church (Meetings with religious leaders/health care)	11/6/99-11/7/99	MIA-HAV-MIA	N	Y	N	N/A
American Medical Assn	12/6/99	SEA-SAN-DCA	N	N	N	N/A

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
Member, Board of Sponsors	Washington Physicians for Social Responsibility
Member, Visiting Committee	The Henry M. Jackson School of International Studies
Member (ex officio), Board of Directors	Washington State China Relations Council
Member, Advisory Committee	Seattle-Chongqing Sister City Association
Member, Foundation Associates	Pacific Science Center
Member, Advisory Board	Childhaven
Member, Advisory Committee	Home Instruction Program for Preschool Youngsters (HIPPY)
Co-Chair, Advisory Committee	Centurions of Seattle Vocational Institute
Earth Work Northwest Advisory Board	The Student Conservation Association
Honorary Member	Seattle-Sihanoukville Sister City Association
Honorary Co-Chair	Lawyers Helping Hungry Children
Member, Millennium Committee	The Spirit of 2000
Honorary Member	World Trade Center Seattle
Member, Advisory Council	Greater Seattle Vietnam Association

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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(B)

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MC (Office Use Only)

James P. McGovern
(Full Name)

393 Burncoat Street
(Mailing Address)

Worcester MA 01606

Daytime Telephone: 508-831-7356

Filer Status	[X] Member of the U.S. House of Representatives — State: MA District: 03	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [X]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jim McGovern	5/15/00

2950

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	General Services Administration (spouse)	salary (spouse)	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name James P McGovern | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	Examples: SP Mega Corp Stock		E	DIVIDENDS	IV	P
	Simon & Schuster		Indefinite	Royalties	IX	
	1st Bank of Paducah, KY accounts		F	INTEREST	VI	
JT	25% interest in 37 Webster Rd Yarmouth, MA (family vacation home)		D	RENT	IV	
SP	Janus Funds		C	DIVIDENDS	IV	
SP	Janus Funds		C	DIVIDENDS	II	
SP	Partner's Funds		C	DIVIDENDS	III	

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Fleet Mortgage, Providence	25% of mortgage on 37 Webster Rd, Yarmouth, MA		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	3/19 - 3/21	DC - Hershey - DC	Y	Y	Y	NO
	US Catholic Conference	7/16 - 7/18	DC - Los Angeles - Boston	Y	Y	N	NO
	Association of Jesuit Colleges	11/12 - 11/15	DC - San Salvador - DC	Y	N	N	NO
	Shimkin Foundation	11/30	DC - NYC - Boston	NO	N	N	NO

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JAMES P. McGOVERN
3RD DISTRICT MASSACHUSETTS

COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE

SUBCOMMITTEES
AVIATION
WATER RESOURCES AND ENVIRONMENT

Congress of the United States
House of Representatives
Washington, DC 20515–2103

416 CANNON BUILDING
WASHINGTON, DC 20515–2103
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FIRST FLOOR
WORCESTER, MA 01608
(508) 831–7356

1 PARK STREET
ATTLEBORO, MA 02703
(508) 431–8025

218 SOUTH MAIN STREET
SUITE 204
FALL RIVER, MA 02721
(508) 677–0140

http://www.house.gov/mcgovern/

(2)

June 7, 2000

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US House of Representatives
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Washington, DC

MC

To Whom It May Concern:

I have enclosed an addendum to Schedule III of my 1999 Financial Disclosure Statement. Also, my response to the question on the cover page on the issue of exclusion of spouse and dependents should be changed from *yes* to *no* on my 1999 Financial Disclosure Statement.

If you have any questions about this matter fell free to contact me at 225-6101. Thank you for your assistance with this matter.

Sincerely,

James P. McGovern
Member of Congress

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Name James P. McGovern | Page ___ of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X								X										X							P
			Simon & Schuster		Indefinite																Royalties								X			
			1st Bank of Paducah, KY accounts					X									X									X						
SP	Congress. FCU money market						X										X								X							
DC	Raymond James Financial Services Inc.				X										X								X									

For additional assets and unearned income, use next page.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

JOHN M. McHugh
(Full Name)

PO Box 863, Pierrepont Manor, N.Y. 13674
(Mailing Address)

Daytime Telephone: (315)-465-5261

HAND DELIVERED
MC (Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives — State: N.Y. District: 24 C.D.	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John M. McHugh	May 11, '00

2957

Name	John M. McHugh	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

Name JOHN M. McHugh | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples.	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	NONE			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	DC Simon & Schuster		Indefinite																	Royalties									X			
	JT 1st Bank of Paducah, KY accounts						X									X										X						
	KEY BANK NA STOCK			X										X								X										
	KEY BANK NA CD			X												X							X									
	NORSTAR BANK, Watertown CD			X												X							X									
	HSBC SAVINGS		X													X						X										
	Congressional FEDERAL Credit Union			X												X							X									
	STATE Employees FEDERAL Credit Union		X													X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John M. McHugh

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Congressional FEDERAL Credit Union - office Acct		X																		X											
	~~Key Bank Speak~~		~~X~~																													

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SCHEDULE IV — TRANSACTIONS

Name John M. McHugh

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	NONE														

This page may be copied if more space is required.

Name John M. McHugh

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	KEY BANK, Watertown, N.Y.	LOAN ON PERSONAL BOAT	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	NONE						

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
MEMBER - Board of Visitors	UNITED STATES Military at West Point

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

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Use additional sheets if more space is required.

LEGISLATIVE ...

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OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(5)

HAND DELIVERED

MC

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Scott McInnis
(Full Name)

320 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202/225-4761

Filer Status	[X] Member of the U.S. House of Representatives	State CO District 03	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[ ]	[X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[X]	[ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	[ ]	[X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[X]	[ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.**	[ ]	[X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Scott McInnis

DATE (Month/Day/Year): 5/10/00

2966

Name Scott McInnis	Page 1 of 1

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source		Activity	Date	Amount
Examples.	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1998	$2,000
	XYZ Magazine	Article	Aug. 13, 1998	$ 500
Kmart Corporation /directed to Boy Scout Troop 225 Glenwood Springs, CO		Appearance	Sept 22, 1999	$500.00

Name Scott McInnis	Page 1 of 2

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed* provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account and provide its value at the end of the reporting year. **Exclude:** Your personal residence(s) (unless there rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see instructions, pages 14-20	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT Alpine Bank of Colorado Savings	$15,001 - $50,000	Interest	$1,001 - $2,500	
JT Bank of Colo (f.k.a. Colorado National Bank) IRAs	$15,001 - $50,000	Interest	N/A	
1st Federal Savings (deferred income)	$50,001 - $100,000	Interest/dividends	N/A	
SP David Smith Ranch Stock	$15,001 - $50,000	Dividends	$1 - $200	
Alpine Bank IRA	$1,001 - $15,000	Interest	N/A	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Invest Partnership (Owns 50 % of value listed				
	AG Edwards Savings	$1,001 - $15,000	Dividends	$201 - $1,000	
	US Bank Corporation Savings	$15,001 - $50,000	Interest	$1,001 - $2,500	
	Superior Industrial Stock	$1,001 - $15,000	None	None	
	LTIC, Inc.	$15,001 - $50,000	None	None	
	Applewood MHP (Sterling)	$100,001 - $250,000	None	None	
JT	Alpine Savings	$50,001 - $100,000	Interest	$5,001 - $15,000	
JT	S & L McInnis LLP 1%	$15,001 - $50,000	Interest/dividends	$201 - $1,000	
	Daxon McInnis Irrevocable Trust	$500,001 - $1,000,000	Interest/dividends	$5,001 - $15,000	
	Tessa McInnis Irrevocable Trust	$500,001 - $1,000,000	Interest/dividends	$5,001 - $15,000	
	Andrea McInnis Irrevocable Trust	$500,001 - $1,000,000	Interest/dividends	$5,001 - $15,000	
JT	Townhome Lot 1 Hills #1 Washington County (St. Georg, UT) 1/6 ownership	$15,001 - $50,000	None	None	
	Thrift Savings	$50,001 - $100,000	Interest/dividends	None	

Name Scott McInnis	Page 1 of 1

SCHEDULE V -- LIABILITIES

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SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Alpine Bank	Line of Credit	$50,001 - $100,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

RECEIVED
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00 MAY 25 PM 3:46

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
RECEIVED
00 MAY 24 PM 5:46
COMMITTEE ON STANDARDS

(9)

MC

INSIDE MAIL

David Martin McIntosh
(Full Name)

1401 West University Avenue, Muncie, IN 47303
(Mailing Address)

Daytime Telephone
202-225-3021

(Committee Use Only)

Filer Status	[X] Member of the U.S. House of Representatives — State: IN District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15) *	[ ] Amendment	[ ] Termination — Termination Date:

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

* Extension granted to May 25

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
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EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dave McIntosh	5/24/00

2971

Name David Martin McIntosh | Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II.

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Name David Martin McIntosh | Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples.	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	N/A			

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Name David Martin McIntosh

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT). In the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples* SP Mega Corp Stock	X	DIVIDENDS: X	IV: X	P
	DC Simon & Schuster	Indefinite	Other Type of Income: Royalties	IX: X	
	JT 1st Bank of Paducah, KY accounts	F: X	INTEREST: X	VI: X	
JT	Charles Schwab One Account	A: X	INTEREST: X	II: X	
DC	Stein Roe Young Investors	C: X	CAPITAL GAINS: X	II: X	
JT	Mutual Fund (sold) Barron Small Capital Fund	C: X	CAPITAL GAINS: X	II: X	
JT	Invesco Strategies	D: X	INTEREST: X; CAPITAL GAINS: X	II: X	
JT	Technology Mutual Fund PBHG Strategies Technology Fund	D: X	INTEREST: X; CAPITAL GAINS: X	III: X	
JT	Ball State Federal CU	C: X	INTEREST: X	II: X	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Martin McIntosh

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Charles Schwab IRA (money market)	B	INTEREST	II	
	The following is also held in Rep. McIntosh's Schwab IRA:				
	Lucent Technologies Inc.	C	DIVIDENDS	II	
SP	Charles Schwab IRA (money market)	B	INTEREST	III	
	The following are also held in Mrs. McIntosh's Schwab IRA:				
	Freemont U.S. Micro Cap Fund	C	DIVIDENDS	II	
	NI Growth & Value Fund (Sold)	C	CAPITAL GAINS	III	
	White Oak Growth Stock Mutual Fund (Sold)	C	DIVIDENDS	II	
	PBHG Technology & Communications Fund	D	INTEREST; CAPITAL GAINS	IV	
	Invesco Technology II Fund	D	CAPITAL GAINS	III	
DC	Charles Schwab Custodial Account	C	INTEREST	II	
DC	Stein Roe Young Investors Mutual Fund	C	CAPITAL GAINS	II	
DC	Invesco Tech II Fund	C	CAPITAL GAINS	III	
DC	Van Wagoner Emerging Grow Fund	C	CAPITAL GAINS	III	

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Name David Martin McIntosh | Page 1 of 1

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	Invesco Strategic Technology Fund	X			2-18-99	X									
JT	Van Wagoner Emerging Grow Fund	X			2-18-99	X									
JT	PBHG Technology Fund	X			2-18-99	X									
JT	Invesco Strategic Technology Fund	X			11-30-99	X									
JT	PBHG Technology Fund	X			12-9-99	X									
DC	Stein Roe Young Investors		X		6-1-99	X									
DC	Invesco Strategic Technology Fund	X			6-18-99	X									
DC	VanWagoner Emerging Grow Fund	X			11-15-99	X									
SP	PBHG Technology and Communications Fund	X			11-29-99	X									
SP	NI Growth and Value Fund		X		6-1-99	X									
SP	White Oak Growth Stock Mutual Fund		X		6-11-99	X									
SP	Invesco Strategic Technology Fund	X			6-18-99	X									
SP	PBHG Technology and Communications Fund	X			12-9-99	X									

This page may be copied if more space is required.

Name David Martin McIntosh | Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude**: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	N/A											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

Name David Martin McIntosh | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Council for National Policy	Jan 21-24	DC-Naples, FL-Orlando, FL	Y	Y	Y	0
	Food Marketing Institute	Jan 24-25	Orlando, FL-DC	Y	Y	Y	0
	The Aspen Institute	Mar 19-21	DC-Hershey, PA-DC	Y	Y	Y	0
	The Hudson Institute	Dec 11-13	Cincinnati, OH-St. Michaels, MD-Indianapolis, IN	Y	Y	Y	1

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Name David Martin McIntosh	Page 1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
National Co-Chairman	Federalist Society for the Law and Public Policy
Visiting Board Member	Regent University

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	N/A	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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2980

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Mike McIntyre
(Full Name)

1701 North Chestnut Street
(Mailing Address)

Lumberton NC 28358
(Mailing Address)

Daytime Telephone: (202) 225-2731

Filer Status	[X] Member of the U.S. House of Representatives	State: NC District: 07	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Mike McIntyre	5/11/00

Name Mike McIntyre	Page of

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$ 500
	K-Mart	appearance	9/22/99	$1,000.00

Name Mike McIntyre	Page of

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP: Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT	102 Elizabethtown Road, Lumberton NC	None	Rent/Capital Gain	$15,001 - $50,000	S
	IRA, BB&T, Lumberton, NC	$15,001 - $50,000		NA	
SP	IRA, BB&T, Lumberton, NC	$1,001 - $15,000		NA	
JT	Checking Acct., BB&T, Lumberton, NC	$15,001 - $50,000	Interest	$1 - $200	
	Lawyers Mutual Liability Ins.	None	Dividends	$201 - $1,000	

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Name Mike McIntyre	Page ___ of ___

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	Office Building, 102 Elizabethtown Road, Lumberton, NC	Sold	11/15/99	$50,001 - $100,000

Name Mike McIntyre	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	BB&T, Lumberton, NC	Mortgage on 102 Elizabethtown Road, Lumberton, NC	$15,001 - $50,000
JT	Douglas & Thelma McIntyre, Lumberton, NC	Mortgage on 102 Elizabethtown Road, Lumberton, NC	$15,001 - $50,000
	(Both mortgages have	been paid in full.)	

Name Mike McIntyre | Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. **Exclude:** Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
American Israel Education Foundation	8/25/99 - 9/2/99	Raleigh, NC - Israel - Raleigh, NC	Y	Y	Y	No
Democratic Leadership Council	4/30/99 - 5/3/99	Wash., DC - New Orleans - Wash., DC	Y	Y	N	No
The Aspen Institute	3/19/99 - 3/21/99	Wash., DC - Hershey, PA - Wash., DC	Y	Y	Y	No

HAND DELIVERED

MIKE McINTYRE
7TH DISTRICT, NORTH CAROLINA
COMMITTEE ON AGRICULTURE
SUBCOMMITTEES:
RISK MANAGEMENT, SPECIALTY CROPS AND RESEARCH
LIVESTOCK AND HORTICULTURE
COMMITTEE ON ARMED SERVICES
SUBCOMMITTEES:
MILITARY PROCUREMENT
MILITARY READINESS
CO-CHAIRMAN
RURAL HEALTH CARE COALITION

Congress of the United States
House of Representatives
Washington, DC 20515–3307

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1605 LONGWORTH BUILDING
WASHINGTON, DC 20515–3307
(202) 225-2731
FAX (202) 225-5773
DISTRICT OFFICES
219 FEDERAL BUILDING
FAYETTEVILLE, NC 28301-5088
(910) 323-0280
701 N. ELM STREET
LUMBERTON, NC 28358-4895
(910) 671-6223
208 POST OFFICE BUILDING
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The Honorable Lamar Smith
Committee on Standards of Official Conduct
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Chairman:

Please accept this letter as a supplement to my 1999 Financial Disclosure Statement which has been filed with the Clerk's Office.

Schedule II of the report contains an entry for a "Payment in Lieu of Honoraria Made to Charity." This payment from Kmart Corporation was to benefit the following drug prevention charity in my district:

Palmer Drug Prevention Program for Robeson County
2501 Elizabethtown Road
Lumberton, North Carolina 28358

If you should need additional information concerning this payment, please do not hesitate to contact me.

Sincerely,

Mike McIntyre

Mike McIntyre
Member of Congress

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 JUN 14 PM 5:46

Howard P. "Buck" McKeon
(Full Name)

2242 Rayburn H.O.B., Wa., D.C.
(Mailing Address)

202-225-1956
Daytime Telephone

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(Office Use Only)

10

Filer Status	☒ Member of the U.S. House of Representatives — State: Ca District: 25	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐ No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒ No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒ No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐ No ☒
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☒ No ☐	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒ No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Howard P. "Buck" McKeon	6/14/00

29871

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: Dividends	Rent	Interest	Capital Gains	Exempt Trust	Qualified Blind Trust	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples: SP Mega Corp. Stock					X								X										X								P
	Examples: Simon & Schuster			Indefinite																Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X									X							
JT	McKeon Bros., a Partnership (YS)	X													X						X											S
	Rental Home - 30007 Grandifloras C.C.	X															X									X						S
	Howard + Phil Ent. Inc. - Stock	X																			X											S
	Charles Schwab + Co. M.M. Fund + Acct.				X											X						X										
	Nat. Health PPT YS - Common Stock	X												X			X							X								S
	Fidelity Contra Fund	X												X			X							X								S

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Howard P. "Buck" McKeon

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Fid. OTC Fund	X												X			X							X							S
	Fid. Sel. Electronics Fund	X												X			X							X							S
	Dean Witter IRA (42904)																														
	Nat. Health PPTYS - Common Stock				X									X																	P
	Baker Hughes "	X												X			X						X								S
	Nat. Tech. Syst. "	X															X				X	Lost									P - S
	Plum Creek Timber "	X												X			X						X								P - S
	Schlumberger Ltd. "	X															X				X	Lost									S
	Ford Motor Co. "			X										X			X							X							S - P
	Pepsico Inc. "	X												X			X							X							P - S
	Group Danone "	X												X			X				X	Lost									P - S
	Oracle Corp "			X													X				X										P
	Liberate Tech "				X												X				X										P
	Barrick Gold "	X															X				X	Lost									P - S
	Walt Disney Co. "	X												X			X					X									P - S
	TNT Post Grp "	X															X					X									P - S
	MSDW Info Fund B - M.F.			X																	X										P
	" Mid Cap Eq. Trust - "			X																	X										P
	" Am. Opp. - "			X																	X										P
	Van Kampen Foc Equity - "			X																	X										P
	" " Em. Grth B - "			X																	X										P
	Alliance Tech B - "			X																	X										P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Howard P. "Buck" McKeon

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Dean Witter - MM Fund		X													X						X										
	~~Baker Hughes Common Stock~~	X															X															S
	Dean Witter IRA (42905)																															
	Baker Hughes - Common Stock	X												X			X							X								S
	Nationwide Health PPTIES " "			X										X																		P
	Schlumberger Ltd. " "	X												X			X							X								S
	Oracle " "				X									X																		P
	Mass Inv. Grth Stock & Mutual			X										X								X										P
	Evergreen Prec. Met. " "	X															X						X									P-S
	Pepsi Co	X												X			X							X								S
	D.W. MM Fund			X												X							X									
*	Mut. Service Corp - IRA — Rollover from 401K from Howard - Phil Ent. Inc. — see Letter To Ethics Com.																															
	dated 6-14-00						X																									
	Nicholas Applegate Int. Sm. Cap. Grth Cl. A — Pilgrim Int. Sm. Cap Gth. Cl A.																															
	Oppenheimer Ent. Cl A																															
	Putnam Grth Opp Fund Cl A																															
	Seligman Hi Yield Bond Cl A																															
	Thornburg Value Cl A																															
	Fidelity Advisor Tech Cl A																															
	Pershing Gov. Acct.																															
	* Originally Titan/Value Equities Group, Inc. — Sold April, '99																															

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SCHEDULE IV — TRANSACTIONS

Name Howard P. "Buck" McKeon Page 5 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	Ford Motor Co — Common Stock	X			2-10-99	X									
	Grp. Danone " "	X			"	X									
	Nationwide Hlth PPTSY " "	X			"	X									
	" " " " "	X			3-17-99	X									
	" " " " "	X			7-16-99	X									
	Nat. Tech Syst. Inc. " "	X			"	X Less Than									
	Oracle " "	X			"	X									
	Pepsico " "	X			"	X									
	Ford " "	X			"	X									
	Plum Creek Timber REI " "		X		8-12-99	X									
	Liberate Tech " "	X			8-6-99	X									
	Walt Disney Co. " "	X			"	X									
	Barrick Gold Co. " "	X			"	X									
	TNT Post Grp. " "	X			9-22-99	X									
	Pepsico " "	X			"	X									
	Grp. Danone " "		X		10-1-99	X									

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SCHEDULE IV — TRANSACTIONS

Name Howard P. "Buck" McKeon Page 6 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	Walt Disney Common Stock	X			10-1-99	X									
	Pepsico " "	X			"	X									
	Baker Hughes " "		X		12-6-99	X									
	Barrick Gold " "		X		"	X									
	Walt Disney " "		X		"	X									
	TNT Post " "		X		"	X									
	Net Tech Syst " "		X		"	X									
	Pepsico " "		X		"	X									
	Schlumberger Ltd. " "		X		"	X									
	Nat. Health PPTYS " "	X			12-23-99	X									
	MSDW Mid-Cap Equity Tr. B - Mut Fund	X			12-13-99	X									
	" Info. Fund B " "	X			"	X									
	" Am. Opp. Fund B " "	X			"	X									
	Van Kampen Focus Equity B " "	X			"	X									
	" " Em. Grth B " "	X			"	X									
	Alliance Tech B " "	X			"	X									

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SCHEDULE IV — TRANSACTIONS

Name Howard P. "Buck" McKeon Page 7 of 10

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: ~~B~~ $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	Nationwide Health PPTYS Common Stock		X		12-27-99		X								
	Fid. OTC Port Mut Fund		X		"	X									
	" Contra Fund " "		X		"	X									
	" Select Elect. " "		X		"	X									
	Baker Hughes Common Stock		X		5-17-99	X									
	" " " "		X		12-2-99	X									
	Nat. Health PPTYS " "	X			2-10-99	X									
	Oracle Corp " "	X			"	X									
	Nat. Health PPTYS " "	X			12-10-99	X									
	Evergreen Prec Metal Hldgs. Mut. Fund		X		12-7-99	X									
	Baker Hughes Common Stock		X		12-6-99	X									
	Schlumberger Ltd. " "		X		"	X									
	Evergreen Prec Metal Hldgs. - Mut. Fund	X			8-20-99	X									
	Mass. Inv. Growth Stk B " "	X			8-4-99	X									
	" " " " " "	X			7-22-99	X									
	Oracle Corp. Common Stock	X			3-22-99	X									

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SCHEDULE IV — TRANSACTIONS

Name

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Rental Home - Grandifloras		X		Spring '99					X					

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Peter Dorsch, Whittier, Ca.	Loan			X							
	Westmoor Mfg. Co., Tarrant Co., Tx.	"			X							
	Forest & Co., Encino, Ca	"	X									
	Valencia Bank, Valencia, Ca	"	X									
	Val. Nat. Bank, " "	Mort					X					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Educational Finance Group	Jan. 28-30	Wa., D.C. - San Diego - Wa, D.C.	Y	Y	Y	N
	Chinese Nat. Assoc. of Ind. + Commerce	Feb. 14-21	L.A., Ca. - Taiwan - L.A., Ca.	Y	Y	Y	N
	SLM Holding Corp.	May 13-16	Wa., D.C. - Panama City, Fl - Wa, DC	Y	Y	N	N
	Career College Assoc.	Apr. 14-15	Wa., D.C. - Tampa, Fl - Wa., D.C.	Y	Y	Y	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Congresswoman Cynthia A. McKinney
(Full Name)

124 Cannon Bldg.
Washington DC 20515
(Mailing Address)

Daytime Telephone: 202-225-1605

Filer Status [X] Member of the U.S. House of Representatives — State: GA District: 04 — [ ] Officer or Employee — Employing Office:

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Cynthia A. McKinney	5/11/2000

2997

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
National Political Congress of Black Women	4/25	Atlanta - Hartford - Atlanta	Y	Y	N	None
Peace Action	8/7 - 8/8	Atlanta - Albuquerque - Atlanta	Y	Y	N	None
Human Rights Campaign	2/20-2/21	DC - Denver -DC	Y	N	N	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Member - Board of Directors	Dikembe Mutombo Foundation, Inc.
Advisory Board Member	Shakur Foundation
Member - Board of Directors	Cool Girls, Inc.
Member - Board of Directors	Africa's Children's Fund
Advisory Board Member	Georgia Council of Adolescent Pregnancy Prevention

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999 | For use by Members, officers, and employees

00 MAY 12 PM 12:43

OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

9

HAND DELIVERED
(Office Use Only)

Michael Robert McNulty
(Full Name)

86 West Street
(Mailing Address)

Green Island, New York 12183

Daytime Telephone (202) 225-5076

Filer Status	[X] Member of the U.S House of Representatives	State: ~~New York~~ District ~~21st CD~~	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A ***$200 penalty*** **shall be assessed against anyone who files more than 30 days late.**

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X] No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ] No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	M. R. McNulty	May 10, 2000

3000

Name	Page 2 of 4
Michael Robert McNulty	

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Green Island Insurance	Renewal Commissions	$2129.00
	Albany County District Attorney's Office	Spouse Salary	

For payments to charity in lieu of honoraria, use Schedule II.

3001

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	The Connell Company	Speech	April 12, 1999	$2,000

This page may be copied if more space is required.

3002

Name Michael Robert McNulty

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			Block A	Block B											Block C							Block D											Block E
				A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock					X								X										X							P
			Simon & Schuster		Indefinite																	Royalties									X		
			1st Bank of Paducah, KY accounts						X									X									X						
	Green Island Insurance 5501 Seminary Rd (201-S) Falls Church, VA (purchased 1989 (own) leased 1997)					X																											
								X									X										X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Michael Robert McNulty

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Fleet Financial Group			X										X								X										

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3004

SCHEDULE IV — TRANSACTIONS

Name Michael Robert McNulty

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	NONE														

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3005

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Norwest Mortgage	Mortgage on 5501 Seminary Rd - 201-S, Falls Church, VA			X							
	C.L. King Associates, Inc., Albany, NY	Secured Loan			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The National Italian American Foundation	Mar 29 to Apr 5	Alb-JFK-Rome-JFK-Alb	Y	Y	Y	N
	The Connell Company	Apr 12	Alb-Newark-DCA	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Capital Region Technology Development Council (not compensated)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

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Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
HUMAN RESOURCE CENTER
00 MAY 15 PM 5:02
(4)
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
HAND DELIVERED
(Office Use Only)

Martin T. Meehan
(Full Name)

126 Belmont Avenue
(Mailing Address)

202-225-3411
Daytime Telephone

Lowell, MA 01852

Filer Status	[X] Member of the U.S. House of Representatives	State: MA District: 5	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Marty Meehan	May 13, 2000

3009

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Lawrence General Hospital	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Martin T. Meehan

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENTS	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								P
Examples:	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
	Congressional FCU Savings Acct.				X											X						X										
	New York Life Ins. Co			X												X						X										
	Legg Mason IRA			X												X							X									
JT	Andover Bank Savings Acct.			X												X							X									
SP	Legg Mason IRA			X												X					NA											
SP	Fidelity IRA			X												X					NA											

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	American Israel Education Foundation	Aug. 25 - Sept. 1	Boston, MA - Israel - Boston, MA	Y	Y	Y	N

3012

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 5:21
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(8)
MC HAND DELIVERED
(Office Use Only)

Carrie P. Meek
(Full Name)

401 Cannon House Office Bldg
Washington D.C. 20515
(Mailing Address)

202-225-4506
Daytime Telephone

Filer Status	☒ Member of the U.S. House of Representatives	State: Florida District: 17	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒ No ☐	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒ No ☐
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒ No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒ No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐ No ☒	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒ No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐ No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐ No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4. § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Carrie P. Meek	May 15, 2000

3013

Name Carrie P. Meek	Page 2 of 7

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	State of Florida	Teachers Pension	$57,509

For payments to charity in lieu of honoraria, use Schedule II.

3014

Name Carrie P. Meek

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock					X							X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	Republic Bank account						X										X								X								
	First Union Nat'l Bank accounts				X												X							X									
	Gainy Credit Union							X									X									X							
	Travelers Tax Shelter Annuity							X									X								X								
	Met Life Asset Annuity				X												X							X									
	Renex Corp.						X	X							X								X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Carrie P. Meek

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Nations Bank accounts 1830 Lamella Tallahassee, Fla.					X								X		X										X					
															X																
	Polycet, Inc					X														see letter	X										

This page may be copied if more space is required.

3016

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	PNC Mortgage	mortage 1830 Lanette Tallahassee, Fla		X								
	MBNA + Citicorp	credit Cards		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Allstate Insurance	Jan. 28-30	Miami - Chicago - Miami	Y	Y	Y	No

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Community Action Agency Dade Co., Fla.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

CARRIE P. MEEK
17TH DISTRICT, FLORIDA

COMMITTEE ON
APPROPRIATIONS

SUBCOMMITTEES
TREASURY, POSTAL
SERVICE, AND GENERAL
GOVERNMENT

VA, HUD, AND
INDEPENDENT AGENCIES

Congress of the United States
House of Representatives
Washington, DC 20515–0917

Please Respond To

☐ 401 CANNON HOUSE
OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4506
(202) 226-0777 FAX

☐ 3550 BISCAYNE BLVD
SUITE 500
MIAMI, FL 33137
(305) 576-9303
(305) 576-9753 FAX

May 15, 2000

Hon. Jeff Trandahl
Clerk of the House of Representatives
H-154 The Capitol
Washington, D.C. 20515

Dear Mr. Trandahl:

The purpose of this letter is to amend my previous financial disclosure statements regarding an asset that I overlooked reporting on Schedule III of the previous disclosure statements that I filed.

I was informed in 1987, five years before I was elected to Congress, that this asset, a company in which I owned shares, was defunct and the shares were worthless. However, I have recently come to learn that the company is, in fact, in operation, and I am attempting to learn the value of my shares.

The name of the asset should be "Puryear, Inc." I have listed the value of this asset as "E" on the advice of my counsel. The type of income I may realize would be Capital Gains. The amount of income, for 1999 and each of the years I filed my disclosure reports, is and has been "None."

Thank you for your kind attention to this important matter.

Sincerely,

Carrie P. Meek

CARRIE P. MEEK
Member of Congress

CPM/js

CARRIE P. MEEK
17TH DISTRICT, FLORIDA

COMMITTEE ON
APPROPRIATIONS

SUBCOMMITTEES
TREASURY, POSTAL
SERVICE, AND GENERAL
GOVERNMENT

VA, HUD, AND
INDEPENDENT AGENCIES

INSIDE MAIL

Please Respond To

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SUITE 500
MIAMI, FL 33137
(305) 576-9303
(305) 576-9753 FAX

Congress of the United States
House of Representatives
Washington, DC 20515–0917

May 26, 2000

(2)

MC

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 30 AM 11:12
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Hon. Jeff Trandahl
Clerk of the House of Representatives
H-154 The Capitol
Washington, D.C. 20515

Dear Mr. Trandahl:

Attached are three copies of Schedule III, page 4 of my 1999 Financial Disclosure Statement, which I have amended upon the advice of the Committee on Standards. I ask that this page be substituted for the same page that I originally submitted on May 15, 2000.

Thank you for your kind attention to this important matter.

Sincerely,

Carrie Meek

CARRIE P. MEEK
Member of Congress

CPM/js
Enclosures

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Carrie P. Meek

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Nations Bank accounts					X								X		X										X						
	1830 Lamella					X									X											X						
	Tallahassee, Fla.																															
	Rubyear, Inc					X														See letter	X											
	Miami, Fla - Retailing																															

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RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 30 AM 11:12
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3022

LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 5:01
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

8

MC HAND DELIVERED
(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

GREGORY W. MEEKS
(Full Name)

660 Grassmere Terrace
(Mailing Address)

202-225-3461
Daytime Telephone

Far Rockaway, NY 11691

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Gregory W. Meeks	5/15/00

Name	Gregory W. Meeks	Page ___ of ___

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples.	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	New York City	Spouse Salary	$17,956.60

For payments to charity in lieu of honoraria, use Schedule II.

3024

Name Gregory W. Meeks	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	Judicial Friends, Queens, New York	Speech	May 16, 1999	$250.00
	First Presbyterian Church of Springfield Gardens Queens, NY	Speech	11-21-99	$500.00

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name: Gregory W.Meeks

Page ___ of ___

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X											X							P
	Examples: Simon & Schuster			Indefinite																Royalties									X			
	Examples: 1st Bank of Paducah, KY accounts						X									X									X							
	Merrill Lynch Global				X									X											X							
	Merrill Lynch Latin American Fund		X														X								X							
	Nicolas Applegate Core Growth				X											X								X								

For additional assets and unearned income, use next page.

Name Gregory W. Meeks

Page ___ of ___

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	NONE														

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Name	Gregory W. Meeks	Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

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Name Gregory W. Meeks	Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Arca Foundation & Christopher Reynolds Foundation	2/17-22	NY-Miami-NY	Y	Y	N	N

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Name Gregory W. Meeks	Page ___ of ___

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
None	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	None	

GPO 2000 82-753 (mac)

Use additional sheets if more space is required.

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1710 Longworth House Office Building
Washington, DC 20515-3208
(202) 225-3461
Fax (202) 226-4169

District Offices:

196-06 Linden Boulevard
St. Albans, NY 11412
(718) 949-5600
Fax (718) 949-5972

20-08 Seagirt Boulevard
Far Rockaway, NY 11691
(718) 327-9791
Fax (718) 327-4722

121-04 Liberty Avenue
Richmond Hill, NY 11419
(718) 738-4200
Fax: (718) 738-5588

Congress of the United States
House of Representatives

GREGORY W. MEEKS
6th District, New York

Committee on Banking and Financial Services
Subcommittees
Financial Institutions and Consumer Credit
Domestic and International Monetary Policy

Committee on International Relations
Subcommittees
Africa
International Operations and Human Rights

00 JUN -7 PM 1:10
HAND DELIVERED
INTAKE/ RESOURCE CENTER

June 6, 2000

The Honorable James V. Hansen
Committee On Standards of Official Conduct
HT2, the Capitol
Washington, D.C 20515

Dear Mr. Chairman:

Please replace this schedule VII with the original schedule VII I filed on May 15, 2000. This is corrected with the correct point of departure-destination-point of return.

If there are questions regarding this please contact Ms. Pat Fisher, my Office Manager at 202-225-3461.

With best regards, I am

Sincerely,

GREGORY W. MEEKS
Member of Congress

GWM/pcf

PRINTED ON RECYCLED PAPER

Name	GREGORY W. MEEKS	Page of

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Arca Foundation & Christopher Reynolds Foundation	2/17-22	NY-Miami-Havana Cuba-NY	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 16 PM 4:54
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
(10)
HAND DELIVERED
mc
(Office Use Only)

Robert Menendez
(Full Name)

517 15th Street, Union City, NJ 07087 — (Mailing Address)
201-222-2828/202-225-7919 — Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: New Jersey District: 13	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert Menendez	May 15, 2000

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Union City Board of Education, 3912 Bergen Turnpike, Union City, NJ	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	N/A			

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Name Robert Menendez

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction
SP, DC, JT	*Examples*	SP	Mega Corp Stock					X							X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X								X									X							
JT	1806 West St. Union City								X							X												X					
JT	535 41st St. Union City									X						X												X					
JT	Hamilton Savings Bank* savings				X												X						X										
JT	Hamilton Savings Bank* checking				X												X						X										
JT	Congressional Credit Union				X				X								X							X									
SP	Fidelity Growth IRA								X								X					X											

*formerly Union City Savings

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert Menendez

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Liberty Fed Credit Union			X												X						X										
JT	Advanced Micro Dev			X																	X											
JT	Info Architects (formerly Alydaar)			X																	X											
JT	AT&T				X									X								X										
JT	Hudson United Bank			X										X								X										
DC	Hudson United Bank			X										X								X										
DC	Merck				X									X								X										
JT	Morgan Stanley			X										X								X										
JT	Motorola			X										X								X										
JT	National Semicond			X																	X											
DC	Pepsi				X									X								X										
DC	Prudential Jennison			X										X								X										
DC	Prudential Pacific			X										X								X										
JT	Sentex Tech		X																		X											
DC	Tricon Global			X										X								X										
JT	Vitesse Semiconductor				X																X											
JT	Xetel Corp			X																	X											
DC	Warner Lambert			X										X								X										
DC	Zenith Electronics		X																		X											
DC	Walt Dispey go.com (was InfoSeek)			X																	X											
JT	Walt Disney go.com			X																	X											
DC	Global Crossing			X																	X											

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SCHEDULE IV — TRANSACTIONS

Name Robert Menendez

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	Le Croy Corp		X		3-24-99	X									
JT	Micron Tech		X		11-17-99	X									
DC	Micron Tech		X		11-17-99	X									
JT	National Semiconductor (partial sale)		X		9-16-99		X								
DC	K-Mart		X		9-18-99	X									
DC	Pepsico (partial sale)		X		9-8-99	X									
DC	Microchip Tech		X		1-20-00	X									
JT	Safeskin Corp	X			4-6-99	X									
JT	Maytag	X			9-21-99	X									
JT	Bank One	X			12-20-99	X									
DC	America On Line	X			2-25-99	X									
DC	Global Crossing	X			9-10-99	X									
DC	Brunswick Corp	X			3-10-99	X									
JT	Spanish Broadcasting Systems	X			11-2-99		X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert Menendez

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
DC	Compaq			X																	X											
DC	America On Line			X																	X											
DC	Brunswick Corp			X																	X											
SP	Oppenheimer IRA- 403				X																X											
SP	Oppenheimer IRA - 403				X																X											
DC	PSE&G			X										X									X									
	State of New Jersey pension -- INDEFINITE																															
JT	Safeskin Corp			X																	X											
JT	Bank One			X										X								X										
JT	Maytag			X										X								X										
JT	Spanish Broadcasting Systems				X																X											

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Hamilton Savings Bank* former Union City Savings	Mortgage on 1806 West St. Union City	X									
JT	Hamilton Savings Bank	Mortgage on 41st St. Union City				X						
	New Jersey State Pension	Loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	N/A	

Use additional sheets if more space is required.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	Assoc. of American Railroads	Jan 10-13	NJ-Phoenix-NJ	Y	Y	Y	N
	Aspen Institute	Feb 12-15	NJ-St. Pete, FL-NJ	Y	Y	Y	N
	Int'l Longshoremans Assoc	July 16-19	NJ-Orlando, FL-NJ	Y	Y	Y	N

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Name	Robert Menendez	Page 10 of 10

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
N/A	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
5-10-93	Henry Furst, Esq.	Buyout of law practice & deferred compensation for legal services prior to entering Congress. No payments received since March, 1999.

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 12 AM 8:16
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(Full Name) Jack Metcalf

(Mailing Address) 4693 Saratoga Road
Langley, WA 98260

Daytime Telephone 202-225-2605

(Office Use Only) (b) MC

Filer Status	☒ Member of the U.S. House of Representatives — State WA District 02	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☐	No ☒
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jack Metcalf	May 11, 2000

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Washington State (not subject to outside earned income)	Pension	$13,200

For payments to charity in lieu of honoraria, use Schedule II.

Name Jack Metcalf | Page 3 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None"

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	IRA Whidbey Island Bank				X												X						NA										
SP	IRA, Whidbey Island Bank				X												X						NA										
JT	Coin Collection					X																X											
JT	Checking, Whidbey Is. Bank					X											X							X									
JT	Checking, Whidbey Is. Bank					X																		X									
JT	Checking, US Bank Langley				X												X						X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jack Metcalf

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Savings, US Bank Langley			X																		X									
JT	Checking, CFCU WP			X																			X								
JT	Savings, CFCU WP			X																		X									
	Checking, CFCU WP		X													X						X									
	Savings, CFCU WP		X													X						X									
SP	Log Castle Bed & Breakfast							X																				X			
	Trust Asset:																														
	54 Acres (1% share)						X															X									
	7 Acres (1% share)							X							X									X							
JT	Interstate West, checking				X											X								X							
JT	Savings, Teachers CU NW	X																			X										Closed!

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Republic Youthful Movement Foundation of Kazakhstan	Oct. 8-12	Wash. DC - Kazakhstan - Wash DC	Y	Y	N	N
	American Egyptian Cooperation Foundation	Nov. 30-Dec 14	Seattle - Cairo - Seattle	Y	Y	Y	3 Days

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LEGISLATIVE RESOURCE CENTER
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U.S. HOUSE OF REPRESENTATIVES

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3048

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

John L. Mica
(Full Name)

2195 Via Tuscany
(Mailing Address)

Winter Park Fl. 32789

Daytime Telephone: 202-25-4035

Filer Status	[X] Member of the U.S. House of Representatives	State: FL District: 07	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/15/00

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash , D C XYZ Magazine	Speech Article	Feb 2, 1999 Aug 13, 1999	$2,000 $ 500
	Education Finance Council, Washington D.C.	Speech	July 23, 1999	$1,000.00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
15 3rd Street, NE Wash. DC, Units 2,4,5 & two garage units	$250,001 - $500,000	Rent	$5,001 - $15,000	
305 East Capitol Street SE, Washington DC, 50% interest, rental unit	$100,001 - $250,000	Rent	$5,001 - $15,000	
Park Lake Woods, Condo Rental, units 8B, 9B, Maitland, FL	$100,001 - $250,000	Rent	$5,001 - $15,000	
Park Lake Woods, Condo Rental, unit 5A, Maitland, FL, 50% partnership	$15,001 - $50,000	Sale	$15,001 - $50,000	S
2195 Via Tuscany, Winter Park, FL	$500,001 - $1,000,000	None, personal residence	None	

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Lot 21, Chetola Estates, Blowing Rock, NC	$250,001 - $500,000	None, personal residence	None	
	1305 S. Atlantic Ave, Unit 130, Cocoa Beach, FL	$100,001 - $250,000	Rent	$2,501 - $5,000	
	National Bank of Commerce, Winter Park, FL	$250,001 - $500,000	Interest	$15,001 - $50,000	
	U.S. Senate Federal Credit Union, Wash., DC (IRA and Savings)	$15,001 - $50,000	Interest	$201 - $1,000	
	Wright Patman Congressional Federal Credit Union	$1 - $1,000	Interest	$1 - $200	
	First Citzens Bank, Blowing Rock, NC	$1 - $1,000	Non-interest checking	None	
	Metropolitan life (IRA)	$100,001 - $250,000	Interest	None	
	Townhouse lots 9,10,11,12, Temple Trail Village Subdivision, Winter Park, FL	$100,001 - $250,000	None	None	
	Mortgage note, Temple Trail Village Partnership, Robert A. Koch, Partner	$100,001 - $250,000	Interest	None	
	Bank of Winter Park/Huntington bank, Winter Park, FL	$500,001 - $1,000,000	Interest	$15,001 - $50,000	

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Park Lake Woods, Condo,Unit 5A, Maitland, FL 50% Partnership	Sold	September 1999	$15,001 - $50,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year.
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	American Savings Bank	Mortgage on Units 8 & 9, Park Lake Woods Condominium, Maitland, FL	$15,001 - $50,000
	GMAC Mortgage Corp., Waterloo, IA	Mortgage on Unit 5A, Park Lake Woods Condominium, Maitland, FL (Sold) Satisfied	$15,001 - $50,000

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Partner	Mica/Temple Trail Properties, Park Lake Woods Condominium, Maitland, FL Unit 5A (Property sold in 1999)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 25 PM 5:01

Congresswoman Juanita Millender McDonald
(Full Name)

419 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone 202/225-7924

HAND DELIVERED
MC (8)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State California District 37	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

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II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

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TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made ~~on this form~~ and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Juanita Millender McDonald	May 25, 2000

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Los Angeles County (Retired 3/28/97)	Spouse Salary	N/A
	Los Angeles Office of Education (Retired 6/30/97)	Spouse Salary	N/A
	Alpha 2 Omega Computer Systems	Spouse Business Income	N/A

For payments to charity in lieu of honoraria, use Schedule II.

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Name Juanita McDonald | Page 3 of 8

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:*	SP Mega Corp. Stock					X								X										X								P
		Simon & Schuster			Indefinite																Royalties									X			
		1st Bank of Paducah, KY accounts						X									X									X							
JT	Chatfield Dean & Company				X												X					X											
JT	Mark Johnson Racing Stable						X															X											
JT	The Fox Group/Century Prop. Accts.				X																	X											
	Los Angeles Teachers Credit Union					X											X									X							
	Holden Group-Deferred Comp.							X														N/A											
SP	County Employees Credit Union Accounts							X									X										X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Juanita McDonald

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	United Mutual Funds			X										X			X					X										P
SP	2nd Baptist Credit Union			X												X						X										
JT	US Savings Bonds				X																X											
	Thrift Savings Plan 401K				X															NA												
JT	850-856 W. 129th Street Gardena, CA/Rental							X							X											X						
JT	1236 W. 64th Street Los Angeles, CA						X														X											
JT	803 N. Grandee, Compton, CA / Rental						X								X											X						
JT	Union Bank Accounts				X											X								X								
SP	Horizons-Def. Comp. Acct.						X									X										X						
JT	Unimproved land near Lancaster, CA						X														X											
	2258 "C" Street NE Washington, DC Condominium						X														X											
JT	Bank of America Accounts			X																	X											
JT	Alpha Z Omega Computer Systems							X													X											

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Name Juanita McDonald

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	United Funds Mutual Funds	X			12-7-99	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Mellon Mortgage Co., Pasadena, CA	Mortgage on 225B "C" Street				X						
	California Credit Union	Loan		X				PAID	OFF	IN	1999	
JT	Nationsbank	Mortgage on W. 129th Street		X				PAID	OFF	IN	1999	
JT	Cal Fed	Mortgage on W. 64th Street		X				PAID	OFF	IN	1999	
SP	County Employees Credit Union	Loan			X			PAID	OFF	IN	1999	

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example. Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Miles College; Birmingham, AL (Commencement Speech)	May 20-22	Wash., D.C.-Birmingham-Wash., D.C.	Y	N	N	N
Economic Leadership Institute/ Columbia Research Group (Attend high-tech conference)	Dec. 15-17	Wash., D.C.-Seattle-Wash., D.C.	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member, Board of Directors	Harbor College Foundation (noncompensated position)
Member, Board of Directors	Southern Christian Leadership Conference
Member, Board of Directors	National Committee on Teaching and America's Future
Panel Member	National Education Goals Panel
Ambassador	University of Southern California
	*** ALL POSITIONS ARE UNCOMPENSATED ***

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Dan Miller
(Full Name)

102 Cannon HOB
(Mailing Address)

Washington DC 20515

Daytime Telephone: 202-225-5015

Filer Status	[X] Member of the U.S. House of Representatives	State: FL District: 13	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ] No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS-Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dan Miller	May 15, 2000

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Name Dan Miller	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Kathryn Polk Darsey Trust	Spouse Trustee Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Dan Miller	Page ___ of ___

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500

Name Dan Miller	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT	*Examples:* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Coastal Corp	$1,001 - $15,000	Dividends	$1 - $200	P
	Dayton Hudson Corp	$1,001 - $15,000	Dividends	$1 - $200	
	EMC Corp-Mass	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	P AND S
	The Gap Inc	$1,001 - $15,000	Dividends	$1 - $200	NA
	Marriott Intl Inc	$1,001 - $15,000	Dividends	$1 - $200	NA
	Schlumberger Ltd	$1,001 - $15,000	Dividends	$1 - $200	S
	Mary A. Miller Family Limited Partnership	$50,001 - $100,000	Dividends	None	

Name Dan Miller | Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Oracle Corp	$100.001 - $250.000	Dividends	None	P
	US Treasury Bill	None	Interest	$1.001 - $2.500	S
	Fannie Mae	$15.001 - $50.000	Dividends	$201 - $1.000	NA
	Lilly Eli & Co	$15.001 - $50.000	Dividends	$201 - $1.000	NA
	MCI WorldCom, Inc.	$15.001 - $50.000	Dividends	None	P
	Manatech Plastics, Inc.	$50.001 - $100.000	Dividends	$5.001 - $15.000	
	American Century Ultra Fund IRA	$100.001 - $250.000	Dividends	None	P
	Bank of America	$1.001 - $15.000	Interest	$1.001 - $2.500	
SP	210 acres Louisiana	$250.001 - $500.000	Rent	$1.001 - $2.500	
	Smith-Barney Money Market	$15.001 - $50.000	Interest	$1.001 - $2.500	
	Segrest-Miller Corp.	$1.000.001 - $5.000.000	Dividends	$100.001 - $1.000.000	
	Miller Brothers of Manatee(Courtyard was sold in 1999)	$1.001 - $15.000	Capital Gains and Dividends	$50.001 - $100.000	NA
	Federal National Mortgage	$15.001 - $50.000	Interest	$2.501 - $5.000	NA
	Pimco Mutual Fund	None	Capital Gains and Dividends	$5.001 - $15.000	S
	Miller Enterprises of Manatee(Suncoast Manor was sold in 1999)	$1.000.001 - $5.000.000	Dividends	None	
	Suncoast of Manatee, Inc	$1.000.001 - $5.000.000	Capital Gains and Dividends	$1.000.001 - $5.000.000	NA
	American Express Notes	None	Interest	$201 - $1.000	S
	Don Miller Development Corp	$250.001 - $500.000	Dividends	$5.001 - $15.000	

Name Dan Miller	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Millers Pier Corp	$100.001 - $250.000	Dividends	None	
	St Louis Revenue Bonds	$15.001 - $50.000	Interest	$1.001 - $2.500	
	Suncoast Deliveries, Inc	$1.001 - $15.000	Dividends	None	
	First Commerce Corp sold to Bank One	None	Dividends	None	
	Congressional Credit Union	$1 - $1 000	Interest	$1 - $200	
	AT&T notes	$15.001 - $50.000	Interest	$1.001 - $2.500	NA
	IBM notes	$15.001 - $50.000	Interest	$1.001 - $2.500	NA
	AES Corporation	$1.001 - $15.000	Dividends	None	P
	AXA Financial	$1.001 - $15.000	Dividends	None	P
	American Power Conversion Corp	$15.001 - $50.000	Dividends	None	P
	Amgen	$1.001 - $15.000	Dividends	None	P
	Cintas Corp	$15.001 - $50.000	Dividends	$1 - $200	P
	Computer Sciences	$15.001 - $50.000	Dividends	None	P
	Hewlett Packard Company	$1.001 - $15.000	Dividends	None	P
	Lucent Technologies	$15.001 - $50.000	Dividends	None	P
	Fed Home Loan Bank notes	$15.001 - $50.000	Interest	$2.501 - $5.000	S
	AFLAC Inc	$15.001 - $50.000	Dividends	$201 - $1.000	P
	Abbott Laboratories	$15.001 - $50.000	Dividends	$201 - $1.000	P AND S
	Electronic Data System	$15.001 - $50.000	Dividends	$201 - $1.000	P

Name Dan Miller	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	General Electric	$50,001 - $100,000	Dividends	$201 - $1,000	P
	McDonalds	$15,001 - $50,000	Dividends	$1 - $200	
	Pepsico	None	Capital Gains and Dividends	$1,001 - $2,500	S
	Pitney-Bowes	$15,001 - $50,000	Capital Gains and Dividends	$2,501 - $5,000	P AND S
	Smith Kline Beecham	$15,001 - $50,000	Dividends	$201 - $1,000	NA
	Stryker Corp	$15,001 - $50,000	Dividends	$1 - $200	P
	Walgreen Company	$1,001 - $15,000	Capital Gains and Dividends	$15,001 - $50,000	S
	Disney (Walt) Holding Co	None	Capital Gains and Dividends	$5,001 - $15,000	S
	Wachovia Corp notes	$1,001 - $15,000	Interest	$201 - $1,000	
	Franklin Small Cap Growth (Formerly Franklin Strategic Mutual Fund)	$50,001 - $100,000	Capital Gains and Dividends	$1,001 - $2,500	P
	Putman Cap Mutual Fund	$100,001 - $250,000	Capital Gains and Dividends	$1,001 - $2,500	P
	Putman New Op Mutual Fund	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	P
	American Bank	$1,001 - $15,000	Interest	None	
	Automatic Data Processing	$15,001 - $50,000	Dividends	$201 - $1,000	P
	Banc One Corp (Acquired First Commerce Corp)	$100,001 - $250,000	Dividends	$5,001 - $15,000	S
	Chubb Corp	None	Dividends	$1 - $200	S
	First Data	$15,001 - $50,000	Dividends	$1 - $200	P
	Home Depot	$50,001 - $100,000	Dividends	$201 - $1,000	P
	Intel Corp	$15,001 - $50,000	Dividends	$1 - $200	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Travelers Property Casualty Corp	$1,001 - $15,000	Interest	$201 - $1,000	S
	Schwab One Money Market	$1,001 - $15,000	Interest	$201 - $1,000	
	Prime Fund Cap Reserves (Brookstreet Money Market)	$1,001 - $15,000	Interest	$201 - $1,000	
	Mutual Series Mutual Discovery	$15,001 - $50,000	Capital Gains and Dividends	$1,001 - $2,500	P
	Seligman Henderson Global Tech	$15,001 - $50,000	Capital Gains	$201 - $1,000	NA
	American General Cap Preferred Stock	$1,001 - $15,000	Interest	$201 - $1,000	NA
	GTE Delaware Preferred Stock	$1,001 - $15,000	Interest	$201 - $1,000	NA
	IBM Corp. Preferred Stock	None	Interest	$201 - $1,000	S
	American Express Co	$15,001 - $50,000	Dividends	$1 - $200	NA
	American Home Products	$1,001 - $15,000	Dividends	$1 - $200	NA
	Medtronic Inc	$1,001 - $15,000	Dividends	None	P
	Merck & Co.	$1,001 - $15,000	Dividends	$1 - $200	P
	Procter & Gamble	$1,001 - $15,000	Dividends	$1 - $200	P
	Wal Mart Stores Inc.	$1,001 - $15,000	Dividends	None	P
	Cisco Systems Inc	$100,001 - $250,000	Dividends	None	P
	Citigroup, Inc(formerl Travelers Group, Inc.)	$15,001 - $50,000	Dividends	$1 - $200	P
	Consolidated Edison Pfd	$1,001 - $15,000	Interest	$201 - $1,000	P
	Sears Roebuck Accep Corp Pfd	$1,001 - $15,000	Interest	$201 - $1,000	P

Name Dan Miller	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Janus Fund	$1,001 - $15,000	Dividends	None	P
	Sears Roebuck Accep Corp	$15,001 - $50,000	Interest	$201 - $1,000	P
	SunTrust Bank	$1,001 - $15,000	Interest	$201 - $1,000	
	American International Group(should have been included last year)	$50,001 - $100,000	Dividends	$1 - $200	P
	Transocean Sedco Forex, Inc.(spin off of Schlumberger)	$1,001 - $15,000	Dividends	None	
	Honeywell International Inc. (acquired Allied Signal)	$1,001 - $15,000	Dividends	$1 - $200	P
	American Century Growth	None	Capital Gains	$1,001 - $2,500	S

Name Dan Miller	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Oracle Corp	Purchase	3/18,6/4,9/28	$15,001 - $50,000
	U S Treasury Bill	Sold	4/1	$15,001 - $50,000
	Intel Corp	Purchase	10/1	$1,001 - $15,000
	Electronic Data System	Purchase	10/1	$1,001 - $15,000
	Pepsico	Sold	2/10,4/14	$15,001 - $50,000
	Banc One Corp	Sold	1/4	$15,001 - $50,000
	Cisco Systems, Inc	Purchase	10/1	$1,001 - $15,000
	First Data	Purchase	2/10	$1,001 - $15,000
	Home Depot	Purchase	10/1	$1,001 - $15,000
	Oakmark Fund	Sold	4/9	$15,001 - $50,000
	American Century Growth	Sold	4/21	$1,001 - $15,000
	American Century Ultra	Purchase	4/12,12/17	$15,001 - $50,000
	AFLAC Inc	Purchase	9/28	$1,001 - $15,000
	Abbott Laboratories	Purchase	9/28	$1,001 - $15,000
	Coastal Corp	Purchase	9/28	$1,001 - $15,000
	Compaq Computer	Sold	4/16,12/30	$1,001 - $15,000

Name Dan Miller	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Disney Holding Co	Sold	6/28,12/30	$15,001 - $50,000
	EMC Corp-Mass	Purchase	9/9,9/28	$15,001 - $50,000
	General ElectricCo	Purchase	9/28	$1,001 - $15,000
	Gillette Co.	Sold	6/25	$1,001 - $15,000
	Citigroup	Purchase	9/28	$1,001 - $15,000
	Abbott Laboratories	Sold	12/30	$1,001 - $15,000
	EMC Corp_Mass	Sold	10/5	$1,001 - $15,000
	American Express Notes	Sold	2/1	$1,001 - $15,000
	IBM Corp Preferred Stock	Sold	6/29	$1,001 - $15,000
	Thermo Electronic Corp	Sold	3/18	$1,001 - $15,000
	Travelers Property Casualty Corp	Sold	2/2	$1,001 - $15,000
	Walgreen Company	Sold	2/10,3/23	$15,001 - $50,000
	Schlumberger Ltd	Sold	3/23	$1,001 - $15,000
	Pimco Mutual Fund	Sold	10/14	$50,001 - $100,000
	Pitney - Bowes	Purchase	9/28	$1,001 - $15,000
	Pitney - Bowes	Sold	5/6	$1,001 - $15,000

Name Dan Miller	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Automatic Data Processing	Purchase	9/28	$1,001 - $15,000
	Chubb Corp	Sold	9/15	$1,001 - $15,000
	Federal Home Loan Mortgage Notes	Sold	3/15	$15,001 - $50,000
	Tyco International Ltd	Purchase	9/15,9/28	$1,001 - $15,000
	AES	Purchase	9/28	$1,001 - $15,000
	Tyco International Ltd	Sold	12/9	$1,001 - $15,000
	AXA Financial, Inc	Purchase	9/28	$1,001 - $15,000
	American Power Conversion Corp.	Purchase	6/25,6/28,9/28	$15,001 - $50,000
	Amgen	Purchase	9/28	$1,001 - $15,000
	Cintas	Purchase	9/28,12/30	$15,001 - $50,000
	Computer Sciences	Purchase	2/5,4/9,9/28	$15,001 - $50,000
	Consolidated Edison Pfd	Purchase	6/24	$1,001 - $15,000
	Hewlett Packard	Purchase	9/28	$1,001 - $15,000
	Janus Fund	Purchase	4/22,12/10	$1,001 - $15,000
	Lucent Technologies	Purchase	9/28,12/30	$15,001 - $50,000
	Medtronic Inc	Purchase	3/18	$1,001 - $15,000

Name Dan Miller	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Merck & Co.	Purchase	9/28	$1,001 - $15,000
	Procter & Gamble Co.	Purchase	9/28	$1,001 - $15,000
	Sears Roebuck Accep Corp Pfd	Purchase	1/27	$15,001 - $50,000
	Sears Roebuck Accep Corp	Purchase	3/5	$15,001 - $50,000
	Wal Mart Stores Inc	Purchase	9/28	$1,001 - $15,000
	Norwest Financial Notes	Sold	9/9	$15,001 - $50,000
	American International Grp	Purchase	9/28	$1,001 - $15,000
	MCI WorldCom, Inc	Purchase	9/28	$1,001 - $15,000
	Schlumberger Ltd.	Purchase	10/1	$1,001 - $15,000
	Stryker Corp.	Purchase	10/1	$1,001 - $15,000
	Mutual Series Mutual Discovery	Purchase	6/25,12/28	$1,001 - $15,000
	Putman Capital Appreciation	Purchase	12/30	$1,001 - $15,000
	Putman New Opportunities	Purchase	12/30	$1,001 - $15,000
	Franklin Small Cap Growth	Purchase	12/28	$1,001 - $15,000
	Allied Signal, Inc. (became Honeywell International)	Purchase	9/28	$1,001 - $15,000

Name Dan Miller	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Miller Enterprises	Loan	$100,001 - $250,000

Name Dan Miller	Page ____ of ____

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name Dan Miller	Page ____ of _____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
	Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
				N	N	N	

Name Dan Miller	Page____ of _____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Director	Miller Enterprises
Director	Miller Brothers
Director	Don Miller Development
Director	Miller's Pier
Director	Segrist-Miller Corp
Director	Manatech Plastics
General Partner	Mary A. Miller Family Limited Partnership

Name Dan Miller	Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 4:25

(14)

MC
HAND DELIVERED
(Office Use Only)

3081

Gary G. Miller
(Full Name)

721 S. Brea Canyon Road, Suite 7
(Mailing Address)

909 444-1761
Daytime Telephone

Diamond Bar, California 91789

Filer Status	[X] Member of the U.S. House of Representatives	State California District 41	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A ***$200 penalty*** **shall be assessed against anyone who files more than 30 days late.**

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-12-2000

Name Gary G. Miller

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash. D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
Fireman's Fund Insurance Company, Wash DC	Speech	May 13, 1999	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None"

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	SP Simon & Schuster		Indefinite																	Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	SalomonSmith Barney Money Fund Retirement Cash Portfolio					X								X										X								
	Class A (401K rolled over from State of California)																															
	IRA Mainstay Equity Index Fund				X																"NA"											
	Mainstay Fund Total Return FD				X																"NA"											
	California PERS			X																	"NA"											
DC	SalomonSmith Barney Money Funds cash Portfolio Class A(1999 IRA)			X										X									X									

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gary G. Miller

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
DC	MCI Worldcom Inc.			X																	X											P
DC	Delaware Group Divid & Income		FD	X										X									X									P
DC	IRA- SB Money Fds Tetire Port		Cl	X										X								X										
SP	IRA Mainstay Equity Index Fund				X																"NA"											
SP	Mainstay Fund Total Return	Fd		X																	"NA"											
SP	SB Money Fds Retire Port Cl	A	(1999 SEP	X IRA)										X									X									
	SEP IRA-																															
	SB Money Fds Retire Port Cl	A		X										X								X										
	Bank of America Corp.			X										X									X									
	Bankers Trust Corp	X												X									X									E
	General Electric Co				X									X								X										
	Gillette Co			X										X								X										
	Home Depot				X									X								X										
	Intel Corp				X									X								X										
	Microsoft Corp				X																X											
	Motorola Inc DE			X										X								X										
	MCI Worldcom Inc			X																	X											P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gary G. Miller

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	Stock Holdings:																														
	SB Money Fds Retire Port CL	A		X										X										X							
	Atlantic Richfield Co DE			X										X								X									
	Cit Group Inc Class A	X												X			X						X								S
	Cisco Sys Inc			X																	X										
	E I DU Pont DE Nemours& Co	X												X			X						X								S
	Golden West Finl Corop-Del	X												X			X						X								S
	HRPT PPTYS TR SH BEN INT	X																													S
	Hewlett Packard Co			X										X								X									
	Ingersoll Rand Co	X												X			X						X								S
	Eli Lilly & CO			X																											S
	MCI Worldcom INC			X																	X										
	Exxon Mobil Corp (formerely (Mobil Corp)			X										X								X									Merger
	Monsanto CO	X												X			X						X								S
	Scottish Power PLC (formerely (Pacificorp)			X										X									X								Merger
	Temple Inland Inc	X															X						X								S
	Wal-Mart Stores Inc			X										X								X									
	Washington Mutual Inc			X										X			X						X								SP
	Franchise Fin Corp Amer	X												X			X						X								P S
	Gateway 2000 INC	X															X						X								PS
	Nextlink Communications Inc	X															X						X								PS

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gary G. Miller

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Stock Holdings continued:																															
	Abercrombie & Fitch CO ClassA			X																	X											P
	America Online Inc Del			X																	X											P
	Amgen INC			X																	X											P
	Lucent Technologies INC			X										X								X										P
	Microsoft Corp			X																	X											P
	Pharmacia & Upjohn Inc			X										X								X										P
	Raytheon CO Class A			X										X								X										P
	Reliastar Finl Corp			X										X								X										P
	Safeway Inc New			X																		X										P
	Schlumberger LTD			X										X								X										P
	Automatic Data Processing			X										X								X										P
	USX U S STEEL Group			X										X								X										P
	United Parcel Service CL B			X																	X											P
	Wells Fargo & Co New			X										X								X										P
	Bell Atlantic Corp			X										X								X										P
	Bristol Myers Squibb Co			X										X								X										P
	Broadwing Inc			X										X							X											P
	Chase Manhattan Corp New			X										X								X										P
	Deere & CO			X										X								X										P
	INTL Business Machines Corp			X																	X											P
	Caroline Pacifc Corp Merged with G.Miller Development CO (COMMON STOCK)								X												X											Merger

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gary G. Miller

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Bank of America				X											X						X										
	Quaker City Federal									X						X											X					
	Pomona First Federal								X							X											X					
	Southcoast Commercial Bank						X									X										X						
	Fidelity Federal						X									X								X								
	Washington Mutual						X									X								X								
	Bankers United Life Assurance Co.				X																											
	SB Money Funds Cash Port CLA			X										X											X							
	APN 8503 003 006 Vacant Land																															
	88+ Acre in Monrovia, CA										X										X											
	APN 8503 015 005 Vacant Land																															
	2.53 Acre in Monrovia, CA							X													X											
	APN 8501 009 008 Vacant Land																															
	75 Acres in Monrovia, CA										X										X											
	APN 239 182 64 Vacant Land	X															X										X					S
	Residential 6+ Acre in Rialto, CA																															
	APN 239 182 62 Vacant Land	X															X										X					S
	Residential, 3+ Acre in Rialto, CA																															
	APN 239 301 01 Vacant Land	X															X										X					S
	Residential, 2+Acre in Rialto, CA																															
	APN 239 301 02 Vacant Land	X															X										X					S
	Residential, 1+Acre in Rialto, CA																															

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Gary G. Miller

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	APN 239 193 11 Vacant Land								X												X											
	Industrial 5 Acres in Rialto, CA																															
	APN 8713 013 009 Vacant Land								X												X											
	Commercial 1 Acre in Diamond Bar, CA																															
	Lot 15 Tract #23483 Diamond Bar, CA								X												X											
	Improved Residential 1+ Acre																															
	Lot 16 Tract #23483 Diamond Bar, CA								X												X											
	Improved Residential 1+ Acre																															
	Lot 91 Tract #23483 Diamond Bar, CA																															
	Improved Residential 1+Acre	X															X											X				S

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SCHEDULE IV — TRANSACTIONS

Name Gary G. Miller

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
DC	DELAWARE GROUP DIVID & INCOME FUND INC	X			01/14/99	X									
DC	MCI WORLDCOM INC	X			01/14/99	X									
	SEP IRA BANKERS TRUST CORP			X	06/04/99	X									
	SEP IRA MCI WORLDCOM INC	X			01/20/99	X									
	ABERCROMBIE & FITCH CO CLASS A	X			06/08/99	X									
	AMERICA ONLINE INC DEL	X			05/04/99										
	AMGEN INC AMGEN INC	X X			03/29/99 05/13/99	X X									
	AUTOMATIC DATA PROCESSING INC.	X			01/26/99	X									
	BELL ATLANTIC CORP	X			01/28/99	X									
	BRISTOL MYERS SQUIBB CO	X			03/29/99	X									
	BROADWING INC	X			07/29/99	X									
	CHASE MANHATTAN CORP NEW	X			03/29/99	X									
	DEERE & CO DEERE & CO	X X			05/17/99 05/27/99	X X									
	EXXON MOBIL CORP	X			06/23/99	X									
	INTL BUSINESS MACHINES CORP	X			11/12/99	X									
	LUCENT TECHNOLOGIES INC LUCENT TECHNOLOGIES INC	X X			02/05/99 07/12/99	X X									

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SCHEDULE IV — TRANSACTIONS

Name GARY G. MILLER

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	MCI WORLDCOM INC	X			08/20/99	X									
	MICROSOFT CORP MICROSOFT CORP	X X			03/29/99 05/17/99	X X									
	PHARMACIA & UPJOHN INC	X			03/26/99	X									
	RAYTHEON CO CLASS A	X			09/27/99	X									
	RELIASTAR FINL CORP	X			05/04/99	X									
	SAFEWAY INC NEW	X			02/11/99 09/30/99	X									
	SCHLUMBERGER LTD	X			05/04/99 06/07/99	X									
	USX U S STEEL GROUP	X			02/25/99	X									
	UNITED PARCEL SERVICE CL B	X			11/23/99	X									
	WASHINGTON MUTUUAL INC	X			08/26/99 09/23/99 12/16/99	X									
	WELLS FARGO & CO NEW	X			02/08/99	X									
	AMB PROPERTY CORP	X	X		03/29/99 09/20/99	X									
	CIT GROUP INC CLASS A	X	X		11/13/98 05/28/99	X									
	COMPAQ COMPUTER CORP	X	X		04/07/99 10/28/99	X									
	FIRST UNION CORP	X	X		03/29/99 09/30/99	X									
	FRANCHISE FIN CORP AMER	X	X		03/30/99 09/21/99	X									

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example.* Mega Corporation Common Stock	X			10-12-98		X								
	GATEWAY 2000 INC	X	X		01/21/99 04/07/99	X									
	GATEWAY 2000 INC	X	X		01/21/99 04/16/99	X									
	GOLDEN WEST FINL CORP-DEL	X	X		10/12/98 03/03/99	X									
	HRPT PPTYS TR SH BEN INT	X	X		09/28/98 07/23/99	X									
	INGERSOLL RAND CO	X	X		09/28/98 03/18/99	X									
	ELI LILLY & CO	X	X		09/29/98 06/23/99	X									
	LYONDELL CHEMICAL COMPANY	X X			05/25/99 08/25/99										
			X		10/28/99	X									
	MONSANTO CO	X	X		11/24/98 08/25/99	X									
	NEXTLINK COMMUNICATIONS INC CLASS A	X	X		10/11/99 12/15/99	X									
	TEMPLE INLAND INC	X	X		09/28/98 03/30/99	X									
	WASHINGTON MUTUAL INC	X	X		09/29/98 02/25/99	X									
	WASHINGTON MUTUAL INC	X	X		09/29/98 05/27/99	X									
	E I DU PONT DE NEMOURS & CO	X	X		10/12/98 10/21/99	X									

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–98		X								
	APN 239 182 64 VACANT LAND IN RIALTO, CA RESIDENTIAL PROPERTY	X	X		11/17/89 11/18/99										
	APN 239 182 62 VACANT LAND IN RIALTO, CA RESIDENTIAL PROPERTY	X	X		12/30/87 11/18/99										
	APN 239 301 01 VACANT LAND IN RIALTO , CA RESIDENTIAL PROPERTY	X	X		11/13/95 11/18/99										
	APN 239 301 02 VACANT LAND IN RIALTO, CA RESIDENTIAL PROPERTY	X	X		02/26/97 11/18/99							X			
	LOT 91 TRACT #23483 DIAMOND BAR, CA RESIDENTIAL LOT	X	X		04/27/88 10/28/99						X				

BECAME ONE TRACT OF ~~50 LOTS~~ 4 PARCELS IN 1 SALE

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Name	Page ~~1~~ 2 of ~~1~~ 3
GaRY G. Miller	

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	American Israel Education Foundation	~~Feb. 17-23~~	DC-Newark-Tel Aviv ~~Tel Aviv-NY-LA~~	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	G. Miller Development Co. (Corp)

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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U.S. HOUSE OF REPRESENTATIVES

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

George Miller
(Full Name)

2205 Rayburn House Office Building
(Mailing Address)

202-225-2095
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: California District: 7	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	George Miller	5.15.00

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name George Miller

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

			Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock						X							X										X								P
			Simon & Schuster			Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X									X										X						
			127 D St., SE, Wash., DC							X							X												X					NA
JT			2002 Greene St., Apt. 412, Columbia, SC (half interest w/son)					X									X						X											NA
			IRA Account - Charles Schwab Co.			X										X			X							X								NA
SP			IRA Account - Charles Schwab Co.			X										X			X							X								NA
JT			Cong. Fed. Credit Union Savings Acct., Wash., DC from refinance of 127 D St			X												X						X										NA
			GE Interest Plus Savings Acct. - transfer from Cong Fed. Credit Union			X												X								X								NA

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name George Miller

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Greenstar Telecom Inc. 500 shares	B X	INTEREST X	IV X	NA
	**T Rowe Price Media and Tele Fund - 232 shares	C X	CAPITAL GAINS X	II X	NA
	Bluestar Battery 300 shares	C X	CAPITAL GAINS X	III X	S
SP	Strong Growth Fund 119.4 shares	C X	CAPITAL GAINS X	II X	NA
	Stock Fund, S.I.F.E. Trust Walnut Creek, CA (IRA)	D X	DIVIDENDS X; CAPITAL GAINS X	IV X	NA
	US Franchise System 175 shares	B X	CAPITAL GAINS X	I X	P

**Formerly called "New Age Media Fund"

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Security Mortgage Co., Columbia, SC	mortgage on 2002 Greene St., Apt. 412, Columbia, SC			X							
	General Electric Capital Mortgage St. Louis, Missouri (refinance)	mortgage on 127 D St., SE Wash., DC				X						
JT	Cong. Fed. Credit Union - Home Equity	home equity on 127 D St., SE Wash., DC		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
Idaho Conservation League	May 21-23	SF-Sun Valley-SF	y	y	y	n
Alaska Rainforest Campaign	May 28 - June 1	SF-Juneau-SF	y	y	y	n
U.S. Soccer Federation	July 30-31	Wash., DC-Louisville, KY-Wash., DC	y	y	n	n
The Aspen Institute	Aug. 15 - Sept. 3	SF-Berlin - Rome-SF	y	y	y	14 days
The Panetta Institute	Sept. 19-20	SF-Monterey-SF	y	y	y	n

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
PE SERVICE CENTER
00 MAY 15 PM 4:06
HAND DELIVERED
(Office Use Only)

David Minge
(Full Name)

RR4 Box 183
(Mailing Address)

Montevideo MN 56265

Daytime Telephone (202) 225-2331

Filer Status	[X] Member of the U.S. House of Representatives — State ____ District: ____	[ ] Officer or Employee — Employing Office ____	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	D. Minge	May 12, 2000

3100

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Trust U/W Martha S. Gibb	spouse fees	NA
	Susan and Peter Tweh	spouse fees	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name David Minge | Page 3 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income
For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction
Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp. Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties								X				
JT	1st Bank of Paducah, KY accounts						X									X									X							
JT	105 acres land Montevideo MN					X									X										X							
	Mutual Shares IRA				X									X			X				NA											
JT	Montevideo Ind Dev Corp bonds		X													X						X										
JT	Mountain Lot Laramie WY			X										NA							X											
	Pebsco American Cent 20th Cent. G						X							X			X				NA											
	Pebsco - Bond Fund of A					X								X							NA											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Minge

Page 4 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	TIAA - Cref					X								X		X	X					NA									
SP	Remainder Interest Gaylord home			X										NA							X										S
SP	Lincoln Nat'l Life Annuit.				X									X							NA										
	T Rowe P European F IRA				X									X			X				NA										
	Nelson Oyen Torpik Minge & Gilbertson Law Partnership			X												X	X								X						S in '93
SP	Penn Mutual Annuity Fidelity				X									X			X				NA										
	Vanguard Growth IRA					X								X			X				NA										P
SP	T Rowe P Equity Income IRA				X									X			X				NA										E (rollover
JT	Vanguard Prime Port. MM					X								X										X							P + S
JT	Vanguard Bond Index Fd				X									X			X							X							P
JT	Vanguard Index Trust 500				X									X			X						X								P
SP	Remainder Interest Cabin Pine River MN				X									NA							X										
JT	US treasury bill			X												X							X								
SP	LBVIP Annuity IRA			X										NA							NA										E (rollover
SP	Ed Jones - Waconia MN Bond			X												X							X								P
SP	Vanguard Total Stock MKT				X									X			X						X								P
SP	T Rowe P Total Equity MKT				X									X			X						X								P
JT	First Nat'l Bank MMKt			X												X						X									P
SP	T Rowe P Equity Index 500 IRA				X									X			X				NA										P (rollover
SP	Ed Jones - Mpls & St P Hsg Bons			X												X							X								
SP	Ed Jones - Mpls & St P Apts Bond			X												X							X								
SP	Ed Jones - Farmington MN Bond			X												X							X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David Minge

Page 5 of 7

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	PERA distribution	NA																		Pension						X						
	Lutheran Brotherhood	X														X				annuity						X						S

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SCHEDULE IV — TRANSACTIONS

Name David Minge | Page 6 of 7

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	Ed Jones - Waconia MN Sch Dist Bond	X			3-12-99		X								
JT	Vanguard Index Trust 500	X			2-11-00	X									
JT	Vanguard Prime Money Market	X	X		various			X							
JT	Vanguard Bond Index Fund - Total	X			1-21-99	X									
SP	Vanguard Total Stock Market	X			4-05-99		X								
SP	T Rowe P Total Equity Market	X			3-30-99		X								
	Lutheran Brotherhood Annuity		X		9-21-99	X									
JT	Vanguard Bond Index Fund - Total	X			6-10-99	X									

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

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Name David Minge | Page 1 of 1

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Int'l. Mgmt. and Dev. Inst.	Jan 10-17	Wash DC - Brussells - Berlin - Mpls MN	Y	Y	Y	3 Days
	Am-Israel Education Foundation	Aug 25 - Sept 1	Mpls MN - Tel Aviv - Jerusalem - Mpls MN	Y	Y	Y	N
	US/Japan LEP Friendship Comm	Nov. 30 - Dec. 4	Mpls MN - Tokyo - Mpls MN	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 5:32

(9)

MC HAND DELIVERED
(Office Use Only)

PATSY T. MINK
(Full Name)

2135 Rayburn House Office Building 202-225-4906
(Mailing Address) Daytime Telephone

Washington DC 20515

Filer Status	[X] Member of the U S House of Representatives	State Hawaii District 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Patsy T. Mink	May 15, 2000

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Patsy T. Mink, State of Hawaii Retirement System		10,000.00
	John F. Mink Spouse Vice President, Subchapter S Corp. Mink + Yuen Inc	Professional	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Patsy T. Mink | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	None			

This page may be copied if more space is required.

Name Patsy T. Mink | Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:* SP Mega-Corp Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X									X							
Jt	Congressional Credit Union 96201			X												X							X									
Jt	Central Pacific Bank																															
	01-489569			X										Checking								X										
	01-489577				X									checking								X										
Jt	Alexander + Baldwin				X									X										X								
	Stocks																															

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Patsy T. Mink

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
Jt	Evergreen Municipal Bd				
Sp	Equitable Life				
	Central Pacific Bk IRA 195436-7				
	Morgan Stanley Dean Witter IRA 124 170626				
Sp	Merrill Lynch IRRA 14587A34				
Sp	Merrill Lynch IRRA 14587A33				
Sp	Morgan Stanley Dean Witter IRA 128 175444				
Sp	Morgan Stanley Dean Witter IRA 129 106553 (previously Merrill Lynch IRA 14583A37 SEP)				
Jt	Putnam Investments Tax Exempt 3374511				
	Prudential Life Ins.				
	Patsy T. Mink Campaign Committee Loans				

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SCHEDULE IV — TRANSACTIONS

Name Patsy T. Mink

Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	None														

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Name Patsy T. Mink | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	None											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Name Patsy T. Mink | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
National Asian Pacific American Conference on Law and Public Policy	March 5 1999 - March 8 - 1999	Wash DC - Boston - DC Total reimbursed $ 208.00	Y	Y	Y- Spouse	Y
Asian Pacific American Assn for Advancement - AT&T	July 16, 1999	Wash DC to Philadelp to DC Total reimbursed $362.18	Y	Y	Y- Spouse	N
Organization of Chinese Americans	July 31, 1999	Wash DC to Dallas to DC Total $ 119.00 one night - hotel pd by host we paid our own plane fare to Dallas	Y	Y	Y- Spouse	N
American Sugar alliance	Aug 9, 1999	DC - SF - Honolulu one night only hotel and limo provided by host	Y	Y	Y- Spouse	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Vice President -	honorary / uncompensated Americans for Democratic Action

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
Jan 1987	State of Hawaii Retirement System	- retirement and health benefits

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

John Joseph Moakley
(Full Name)

1812 Columbia Road
(Mailing Address)

South Boston MA 02127

Daytime Telephone: 617-428-2000

Filer Status	[X] Member of the U S House of Representatives	State MA District 09	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John Joseph Moakley	5/11/00

3116

Name John Joseph Moakley | Page 4 of 5

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commonwealth of Massachusetts	Legislative Pension	$7,133.00
	United States Veterans Administration	Disability	$1,150.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Legg Mason Putnam Growth Mutual Fund	$50,001 - $100,000	Capital Gains and Dividends	$5,001 - $15,000	NA
Mt. Washington Co-operative Bank of South Boston	$50,001 - $100,000	Interest	$2,501 - $5,000	NA
Wright Patman Congressional Credit Union	$1,001 - $15,000	Interest	None	NA

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. **Exclude:** Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Invest to Compete Alliance	July 2-4	Boston-Chatham-Boston	Y	Y	N	None
US Catholic Conference	July 16-19	Washington DC-Los Angeles-Boston	Y	Y	N	None
Association of Jesuit Colleges and Universities	November 12-15	Washington-El-Salvador-Washington	Y	Y	N	None

Name John Joseph Moakley | Page 5 of 5

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Board of Trustees	Suffolk University, Boston, Massachusetts
Board of Directors	Biotechnology Center of Excellance Corporation

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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(B)

HC (Office Use Only)

Alan B. Mollohan
(Full Name)

2346 Rayburn Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone 202/225-4172

Filer Status	[X] Member of the U.S. House of Representatives	State: WV Distrct: 1st	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Alan B. Mollohan	May 15, 2000

3121

Name Alan B. Mollohan	Page 2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Remington, Inc.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Alan B. Mollohan

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None"

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts					X									X									X							
JT	Rental property-60 G St SW, WDC 20024							X								X											X						
JT	3 promissory notes for property purchase: Remington, Inc.					X											X								X								
	25% ownership - Remington, Inc.				X																Sub S Corp. income						X						
SP	25% ownership - Remington, Inc.				X																"						X						
SP	City of Fairmont, WV Sewer Revenue Bonds					X											X								X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Alan B. Mollohan

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction (P, S, E)
SP	Kanawha County, WV Bldg. Revenue Bond	D: $15,001 – $50,000	INTEREST	IV: $1,001 – $2,500	
SP	WV Hospital Finance Authority Bond	A: None	INTEREST	V: $2,501 – $5,000	E
SP	Huntington Nat'l Bank Money Market Account	D: $15,001 – $50,000	INTEREST	IV: $1,001 – $2,500	
SP	1/5 int. coal,oil,gas 6.5ac Linn Lick, Center Dist. Gilmer	B: $1 – $1,000	QUALIFIED BLIND TRUST: Royalty	II: $1 – $200	
SP	1/5 int. coal,oil,gas 27ac Linn Lick, Center Dist. Gilmer	B: $1 – $1,000	QUALIFIED BLIND TRUST: Royalty	II: $1 – $200	
SP	3.33% int. oil & gas 35ac Bull Fork, DeKalb Dist. Gilmer	C: $1,001 – $15,000	QUALIFIED BLIND TRUST: Royalty	II: $1 – $200	
SP	5/32 int. oil & gas 242ac NS Kanawha, Glenville Dist. Gilmer	D: $15,001 – $50,000	QUALIFIED BLIND TRUST: Royalty	IV: $1,001 – $2,500	
SP	PaineWebber Putnam Global Growth IRA	C: $1,001 – $15,000	Other Type of Income (Specify): NA		

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3124

SCHEDULE IV — TRANSACTIONS

Name Alan B. Mollohan

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	WV Hospital Finance Authority Bond (called for redemption)			X	9-27-99		X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	GE Capital Mortgage Services	Mortgage - 60 G St. SW, Washington, DC 20024				X						
JT	Huntington National Bank	Revolving credit line		X								
JT	Huntington National Bank	Loan against WV bonds	X									
JT	First USA Visa	Revolving charge acct.		X								
JT	MBNA America Visa	Revolving charge acct.		X								
JT	Travelers Bank Visa	Revolving charge acct.		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

RECEIVED
FINANCIAL DISCLOSURE CENTER
00 MAY 12 AM 10: 10
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(9) MAY 11 2000

(Office Use Only)

DENNIS W. MOORE
(Full Name)

8319 Mullen Rd, Lenexa, KS 66215
(Mailing Address)

Daytime Telephone 913-383-2013

Filer Status	[X] Member of the U.S. House of Representatives — State: KS District: 3rd	[ ] Officer or Employee — Employing Office	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Dennis Moore	5-05-00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Midwest Perinatal Associates, P.A.	Spouse Salary	N/A
	Erker & Moore (Not subjected to outside earned income limit)	Partnership	10,316.00

For payments to charity in lieu of honoraria, use Schedule II.

Name Dennis W Moore | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
None			

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction (P, S, E)
SP	Examples: Mega Corp Stock					X								X										X								P
DC	Indefinite: Simon & Schuster																			Royalties								X				
JT	1st Bank of Paducah, KY accounts						X									X									X							
	ALL AMERICA (IRA)					X								X		X	X				NA											
	AMERICAN CENTURY (IRA)				X												X				NA											
	AMERICAN CENTURY MYMI (IRA)			X										X							NA											
JT	Capitol Federal Savings			X												X						X										
	Fidelity Cash Res. (IRA)				X									X							NA											
	ICMA Retirement (IRA)					X								X		X					NA											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DENNIS W MOORE

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	INVESCO Funds (IRA)				X									X			X					NA										
SP	Merrill Lynch ESPP			X										X								NA										
SP	Security Bank (IRA)				X											X						NA										S
	SUN COMPANY STOCK			X										X									X									
	VANGUARD Wellington (IRA)			X										X			X					NA										
	" Index Fund (IRA)					X								X			X					NA										
	" US Growth (IRA)					X								X			X					NA										
	" Energy (IRA)				X									X			X					NA										
JT	Western Resources			X										X									X									
	American Funds			X										X			X						X									
SP	All America Financial (IRA)						X							X			X					NA										
JT	INVESCO			X										X			X						X									
SP	All America Financial (IRA)			X										X		X						NA										P
	Condo - 8289 Monroe, Lenexa, KS														X											X						

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SCHEDULE IV — TRANSACTIONS

Name

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	AllAmerica Financial (IRA)	X					X								
SP	Security Bank (IRA)		X				X								

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	BANK - United Savings Assn of Texas	MORTGAGE - 8289 Monrovia		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	PROJECT INTERCHANGE	Aug 21-29	KC, Mo - ISRael - KC, Mo	Y	Y	Y	
	ASPEN INSTITUTE	March 19-21	WASH D.C - Hershey PA - Wash DC	Y	Y	Y	

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	None

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	None	

GPO 2000 62 753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 2:18
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(3)

HAND DELIVERED
(Office Use Only)

MC

James P. Moran, Jr.
(Full Name)

2426-B South Walter Reed Dr., Arlington, VA 22206 — 202-225-4376
(Mailing Address) — Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State VA District 8th	[ ] Officer or Employee — Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [XX]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [XX]	No [ ]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [ ]	No [X]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [XX]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James P. Moran	5/15/00

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Name	James P. Moran, Jr.	Page ___ of ___

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	McEnearney Associates, Inc.	Spouse income	$1000+
	Century 21 Quality Homes	Spouse income	$1000+

For payments to charity in lieu of honoraria, use Schedule II.

Name James P. Moran, Jr.	Page ___ of ___

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	Kmart Family Foundation	Speech	9/22/99	$500.00
	Alexandria Historical Society	Speech	9/22/99	$ 50.00
	Manufacturers Alliance	Speech	12/9/99	$1000.00

This page may be copied if more space is required.

Name James P. Moran, Jr. | Page ___ of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Congressional Federal Credit Union	Revolving charge	X									
JT	First USA Bank	Revolving charge	X									
JT	C.F.C.U. ~~(Line of Credit)~~	Visa card	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name James P. Moran, Jr. | Page ___ of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Hershey Bipartisan Retreat Aspen Institute	3/19-21	Wash.D.C.-Hershey PA-DC	Y	Y	Y	N
	Congressional Economic Leadership Institute	3/26-4/1	Wash.D.C.-Florence, Rome Italy-Wash.D.C.	Y	Y	N	N
	Democratic Leadership Conf. Spring Retreat	4/30-5/3	Wash.D.C. - New Orleans- Wash. D.C.	Y	Y	N	N
	The Wilderness Society; Alaska Wilderness League; Sierra Club	7/3-8	Wash. D.C. - Alaska - Wash. D.C.	Y	Y	Y	N
	Visions Project, Kennedy School of Gov't, Harvard U.	11/19-20	Wash. D.C. - Boston - Wash. D.C.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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JERRY MORAN
(Full Name)

2758 Thunderbird Drive, Hays, KS 67601 (202)225-2715
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State Kansas District First	[ ] Officer or Employee	Employing Office.
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jerry Moran	5/11/00

3141

Name JERRY MORAN

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* Mega Corp. Stock	SP					X								X										X									P
	Simon & Schuster			Indefinite																	Royalties									X				
	1st Bank of Paducah, KY accounts							X									X									X								
JT	Emprise Bank, N.A., accounts Hays, Ks.					X											X								X									
	Federated Investors, mutual funds							X									X										X							
DC	Emprise Bank, N.A., accounts Hays, Ks.				X												X							X										
DC	Sunflower Bank, N.A., accnts Hays, Ks.				X												X							X										
	American Capital World Growth, mutual fund					X									X		X	X							X									
DC	Golden Plains Credit Union Hays, Ks. (accounts)			X													X						X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JERRY MORAN

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	First Fed.Lincoln accounts Plainville,Ks.	A X	INTEREST	III	Closed
JT	Highlands Insurance Co., common stock	B X	DIVIDENDS	I	
JT	Halliburton Corporation, common stock	C X	DIVIDENDS	II	
JT	Franklin Gold Fund, mutual fund	B X	DIVIDENDS; CAPITAL GAINS	II	
JT	Exxon Mobil Corp,common stock	D X	DIVIDENDS	III	
JT	Boeing Co.,common stock	C X	DIVIDENDS	II	
JT	Texaco Inc.,common stock	C X	DIVIDENDS	II	
	Aetna Variable Fund, mutual fund	C X	DIVIDENDS; CAPITAL GAINS	III	
	Aetna Fixed Account mutual fund	C X	INTEREST	IV	
	Fidelity VIP-Portfolio, mutual fund	C X	DIVIDENDS; CAPITAL GAINS	III	
	Janus Aspen Growth Portfolio,mutual fund	C X	DIVIDENDS; CAPITAL GAINS	III	
SP	Lincoln Life,Growth & Income,mutual fund	C X	DIVIDENDS; CAPITAL GAINS	III	
SP	Lincoln Life Special Opportunities,mutual fund	C X	DIVIDENDS; CAPITAL GAINS	III	
JT	Schlumberger Ltd.,common stock	C X	DIVIDENDS	II	
DC	Missouri College Savings Bond	C X	INTEREST	I	gift relative
DC	Series F Bonds	C X	INTEREST	I	gift relative
JT	Fidelity Growth Opportunity,mutual fund	C X	DIVIDENDS; CAPITAL GAINS	III	
SP	Putnam Voyager B mutual fund	D X	DIVIDENDS; CAPITAL GAINS	V	P
	AIM Value B mutual fund	E X	DIVIDENDS; CAPITAL GAINS	VI	P
SP	MFS Emerging Growth B mutual fund	D X	DIVIDENDS; CAPITAL GAINS	V	P
JT	Pfizer,common stock	C X	DIVIDENDS; CAPITAL GAINS	IV	P
JT	Transocean Offshore common stock	B X	DIVIDENDS	II	Stock Spinoff

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SCHEDULE IV — TRANSACTIONS

Name JERRY MORAN

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
SP	Putnam Voyager B, mutual fund	X			02-17-99		X								
	AIM Value B, mutual fund	X			02-18-99			X							
SP	MFS Emerging Growth B, mutual fund	X			02-18-99		X								
JT	Pfizer, common stock	X			11-29-99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Chicago Board of Trade	March 18-20 1999	Wash.,DC-BocaRaton,FL-Wichita,Ks.	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	Ft.Hays State University Endowment Association, Havs,Ks.
Governor	Bd.of Governors, University of Ks., School of Law, Lawrence,Ks.
Executive Member	The Eisenhower Foundation, Abilene,Ks.
Executive Brd. Member	Coronado Area Council Boy Scouts of America, Salina, Ks.

SCHEDULE IX — AGREEMENTS-NONE

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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(9)
HAND DELIVERED
(Office Use Only)

Constance A. Morella
(Full Name)

2228 Rayburn Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone 202-225-5341

Filer Status	☑ Member of the U S House of Representatives — State MD District 8	☐ Officer or Employee — Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑ No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐ No ☑
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐ No ☑	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑ No ☐
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑ No ☐	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑ No ☐
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑ No ☐	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐ No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑ No ☐	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Constance A. Morella	May 15, 2000

Name Constance A. Morella | Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	American University, Washington, D.C.	Spouse Salary	NA
	State of Maryland	Teacher/Legislator Pension	$19,012

For payments to charity in lieu of honoraria, use Schedule II.

Name Constance A. Morella

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
SP, DC, JT		SP	A None; E $50,001 – $100,000	DIVIDENDS	I None; V $2,501 – $5,000	P, S, E
DC	Examples.		Indefinite	Other Type of Income (Specify: For Example: Partnership Income or Farm Income): Royalties	IX $100,001 – $1,000,000	P
JT			F $100,001 – $250,000	INTEREST	VI $5,001 – $15,000	
	Boeing Co.		D $15,001 – $50,000	DIVIDENDS	III $201 – $1,000	P
	Cagles, Inc.		C $1,001 – $15,000	DIVIDENDS	II $1 – $200	
	DuPont		D $15,001 – $50,000	DIVIDENDS	III $201 – $1,000	
	Exxon Mobil		E $50,001 – $100,000	DIVIDENDS	IV $1,001 – $2,500	
	Kinder Morgan, Inc.		C $1,001 – $15,000	DIVIDENDS	II $1 – $200	P
	Manor Care, Inc.		D $15,001 – $50,000	DIVIDENDS	II $1 – $200	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Constance A. Morella

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Merck & Co., Inc.				X									X									X									
	Minnesota Mining				X									X									X									
	Monsanto Co.				X									X								X										P
	New Plan Realty Trust				X									X									X									
	Pfizer, Inc.						X							X										X								
	Riggs Nat'l Corp.			X										X								X										
	Sara Lee Corp.				X									X								X										P
	USX - Marathon				X									X									X									
	U.S. Treas. Note					X										X									X							
	Schwab Money Mkt.					X										X								X								
	Bank of America IRA				X											X						NA										
	Oppenheimer Fund			X										X								NA										
	East Cambridge Savings			X										X									X									
	MD State Deferred					X										X						NA										
	Congressional Credit Union				X											X								X								
SP	K Mart Corp			X										X									X									S
SP	EMC Corp Mass.			X										X									X									P
SP	Occidental Pete. Corp.			X										X										X								
SP	Potomac Electric			X										X									X									
SP	St. Paul Co		X											X									X									S
SP	U.S. Treas. Note				X											X									X							

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Constance A. Morella

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Bank of Amenia IRA				X											X						NA										
SP	Oppenheimer Funds				X											X						NA										
SP	Schwab Gov't Money Fund			X												X							X									
SP	TIAA-Cref Pension								X													NA										
JT	Van Kampen Merit			X												X							X									
JT	U.S. Savings Bonds					X										X						NA										
JT	607 Twinbrook Pkwy Rockville, MD					X									X						X											

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SCHEDULE IV — TRANSACTIONS

Name Constance A. Morella | Page 6 of 9

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–99		X								
	Boeing	X			1-4-99		X								
	Kinder Morgan, Inc.	X			1-4-99	X									
	Monsanto Co.	X			2-10-99		X								
	Sara Lee Corp.	X			7-27-99		X								
SP	K Mart Corp.		X		12-07-99	X									
SP	EMC Corp. Mass.	X			7-27-99	X									
SP	St. Paul Companies		X		8-27-99	X									

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3152

Name Constance A. Morella | Page 7 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Chase Mortgage	Home Mortgage: 6601 Millwood Rd. Bethesda, MD 20817			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Constance A. Morella | Page 8 of 9

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute; Education in Ami Youth participant	Feb. 12-15	Wash. D.C.-St. Petersburg, Fla - Wash. D.C.	Y	Y	Y	N
	Bipartisan Congressional Retreat	March 19-21	Wash. D.C. - Hershey, Pa. - Wash. D.C.	Y	Y	Y	N
	NIAF Interparliamentary Conference participant	March 29-Apr. 5	New York - Rome, Italy - New York	Y	Y	Y	N
	Alaska Rainforest Campaign: Conservation Fact Finding	May 28-June 1	Dulles - Juneau, Alaska - Dulles	Y	Y	Y	N
	Aspen Institute; U.S. - Russia Relations participant	Aug. 15-21	Dulles - Berlin, Germany - Dulles	Y	Y	Y	N
	Glamour Magazine: Women of Year Awards Event	Nov. 11-13	Wash. D.C. - N.Y.C. - Wash. D.C.	Y	Y	Y	1 DAY

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board	Cafritz Foundation, Washington, D.C.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 AM 9:37

HAND DELIVERED
(Office Use Only)

JOHN P. MURTHA, JR.
(Full Name)

109 COLGATE AVENUE
(Mailing Address) Daytime Telephone

JOHNSTOWN, PA 15905

Filer Status	[X] Member of the U.S. House of Representatives — State: PA District: 12TH	[ ] Officer or Employee — Employing Office	A ***$200 penalty*** **shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John P. Murtha	5/9/00

3156

Name JOHN P. MURTHA, JR.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

				A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp Stock					X								X									X									P
			Simon & Schuster			Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts						X									X									X							
JT	CHARLES SCHWAB					X										X								X										
SP	CONGRESSIONAL FCU					X												X							X									
	WESBANCO, INC.						X									X										X								P
	CENWEST BANK					X												X					N/A - IRA											
	CONGRESSIONAL FCU					X												X					N/A - IRA											
SP	CONGRESSIONAL FCU					X												X					N/A - IRA											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN P. MURTHA, JR.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	CENWEST BANK			X												X						N/A	-	IRA								
	CONGRESSIONAL FCU		X													X							X									
SP	MENTOR GROWTH PORT CLB	X																														S
SP	EVERGREEN FDS			X													X							X								P
SP	J.R. FINDEISEN(PARENTS ESTATE)	X														X							X									S
	AXA FINANCIAL (FORMERLY-EQUITABLE COS.)			X										X									X									

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SCHEDULE IV — TRANSACTIONS

Name JOHN P. MURTHA, JR.

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	WESBANCO, INC. (QUARTERLY DIVIDEND REINVESTMENT)	X			1-04-99										
	WESBANCO, INC. (QUARTERLY DIVIDEND REINVESTMENT)	X			4-01-99										
	WESBANCO, INC. (QUARTERLY DIVIDEND REINVESTMENT)	X			7-01-99	X									
	WESBANCO, INC. (QUARTERLY DIVIDEND REINVESTMENT)	X			10-01-99										
SP	MENTOR GROWTH PORT CL B		X		8-31-99	X									
SP	DELL COMPUTER CORP.	X			8-20-99	X									
SP	DELL COMPUTER CORP.	X			8-31-99	X									
SP	EVERGREEN FDS	X			11-29-99	X									
SP	J. R. FINDEISEN (PARENTS ESTATE)		X		1-05-99	ESTATE	CLOSED								

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	ARMSTRONG COUNTY INDUSTRIAL DEVELOPMENT COUNCIL	OCT. 7, 1999	WASH., DC - JOHNSTOWN	N	N	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

(Full Name) Suellen Wilkins Myrick

(Mailing Address) 9169 Bonnie Briar Circle

Daytime Telephone 202-225-1976

Charlotte NC 28277

(Office Use Only) MC (4)

Filer Status	☑ Member of the U S House of Representatives — State NC District 09	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☑
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☑
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☑
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☑
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Suellen Myrick	5/12/00

Name	Page
Sue Myrick	2 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Myrick Enterprises	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Sue Myrick | Page 3 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: None	A: $1 – $1,000	B: $1,001 – $15,000	C: $15,001 – $50,000	D: $50,001 – $100,000	E: $100,001 – $250,000	F: $250,001 – $500,000	G: $500,001 – $1,000,000	H: $1,000,001 – $5,000,000	I: $5,000,001 – $25,000,000	J: $25,000,001 – $50,000,000	K: Over $50,000,000	L	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	Block D: None	I: $1 – $200	II: $201 – $1,000	III: $1,001 – $2,500	IV: $2,501 – $5,000	V: $5,001 – $15,000	VI: $15,001 – $50,000	VII: $50,001 – $100,000	VIII: $100,001 – $1,000,000	IX: $1,000,001 – $5,000,000	X: Over $5,000,000	XI	Block E: P, S, E
SP		SP	Mega Corp Stock					X								X											X								P
DC	*Examples*		Simon & Schuster		Indefinite																	Royalties									X				
JT			1st Bank of Paducah, KY accounts						X									X										X							
JT	Edward Jones Mutual Funds						X																		N/A										P
JT	9169 Bonnie Briar Circle							X																											P
JT	310 W. 8th St.								X																										S

For additional assets and unearned income, use next page.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
trustee	Heidelberg College, Tiffin Ohio

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
'00 MAY 15 PM 6:46
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
(6)

Jerrold Lewis Nadler
(Full Name)

315 West 70th Street, Apt. 3C
(Mailing Address)

New York, N.Y. 10023

(202) 225-5635
(212) 334-3207
Daytime Telephone

HAND DELIVERED
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives — State N.Y. District 8	☐ Officer or Employee	Employing Office
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jerrold Nadler	5/14/00

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Name	Page
Jerrold Lewis Nadler	2 of 6

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	New York State Comptroller's Office	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name Jerrold Lewis Nadler | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source		Value of Asset (Block B)	Type of Income (Block C)	Amount of Income (Block D)	Transaction (Block E)
SP, DC, JT	Examples	SP	Mega Corp Stock	DIVIDENDS: X	I: X	P
			Simon & Schuster	Royalties		
			1st Bank of Paducah, KY accounts	INTEREST: X	VI: X	
	Smith Barney Money Funds		B: X	INTEREST: X	II: X	
	State of Israel Bond		C: X	INTEREST: X	I: X	Matured
	Estt Energy Partners, L.L.P.		C: X	Partnership income	IV: X	
	Amerigas Partners, L.L.P.		C: X	Partnership income	III: X	
	Alabama Power Company		C: X	INTEREST: X	III: X	
	Republic National Bank		C: X	INTEREST: X	I: X	

Value of Asset (Block B): A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000

Type of Income (Block C): DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example: Partnership Income or Farm Income)

Amount of Income (Block D): I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000

Transaction (Block E): P, S, E

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Jerrold Lewis Nadler

Page 4 of 6

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Histadrut Charitable Remainder Trust			X												X						X									
	U.S. Savings Bonds			X												X						X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The City Club of Cleveland	4/16/99	NYC → Cleveland + return	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Vice President	Americans for Democratic Action
Member, Board of Directors	Community Free Democrats
Vice President	Bnai Zion

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CLERK'S OFFICE
00 MAY 15 PM 5:36
(6)

HAND DELIVERED
(Office Use Only)

Grace F. Napolitano
(Full Name)

1407 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 202/225-5256

Filer Status	[X] Member of the U.S. House of Representatives — State: California District: 34	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Grace F. Napolitano	5-15-00

3171

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U. S. House of Representatives	Salary	$124,549
	Ford Motor Co. Retirement Pension Plan	Pension	10,802
	State of California Public Employees Retirement System	Pension	4,789
	Group 97 Special Payment	Pension	364
	United States Railroad Retirement Board	Spouse's Pension	N/A
	The Girls	Sole Proprietor	2,331

For payments to charity in lieu of honoraria, use Schedule II.

Name Grace F. Napolitano | Page 3 of ___

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan over which you have investment power, provide the required information on each underlying asset that exceeds the value or income reporting threshold. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Examples Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	*Examples:* SP Mega Corp. Stock					X								X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts						X									X										X						
	Fidelity Investments IRA					X														N/A												
	Fidelity Cash Reserves		X																													
	Fidelity Blue Chip				X																											
	Fidelity Select Food & Ag			X																												
	Ford Motor Co. Tel NFSC 15 Specialist				X																											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Grace F. Napolitano

Page 4 of ___

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Napolitano for Congress						X												Loan Repayment							X					

This page may be copied if more space is required.

Name Grace F. Napolitano | Page 5 of ___

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example.	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wells Fargo Bank	Home Equity Line of Credit			X							
	Dearborn Federal Credit Union	Loan	X									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51, re-numbered as clause 5 of House Rule 26 in the 106th Congress) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

Name Grace F. Napolitano | Page 6 of ___

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
CONGRESSIONAL HISPANIC CAUCUS INSTITUTE AND PACIFIC GAS & ELECTRIC	AUG 19 TO AUG 22 1999	LOS ANGELES - SAN FRANCISCO - SEATTLE	Y	Y	N	N
MICROSOFT AND BOEING	AUG 23, 1999	SF -	N	N	N	N
AMERICAN ISRAEL EDUCATION FOUNDATION	AUG 25 - SEPT. 2, 1999	LOS ANGELES - NEW YORK - L.A.	Y	Y	N	N

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

HAND DELIVERED

MC (5)

Richard E. Neal
(Full Name)

2236 Rayburn House Office Building
(Mailing Address)

202 225-5601
Daytime Telephone

Washington, D.C. 20515

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 9 PM 4:45
(Office Use Only)

Filer Status	[X] Member of the U S House of Representatives	State - District MA 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [X]	No [ ]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Richard E. Neal	5/9/00

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Name Richard E. Neal	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commonwealth of Massachusetts (University of MA)	Approved Teaching	$19,990.
	Commonwealth of Massachusetts	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 1999	$500
The Council of Insurance Agents & Brokers	Speech	Feb. 2, 1999	$2,000

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source		Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example: Partnership Income or Farm Income))	Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Transaction (P, S, E)
SP, DC, JT	Examples: SP Mega Corp Stock	E	X	DIVIDENDS	IV	P
	Examples: Simon & Schuster	B	Indefinite	Royalties	IX	
	Examples: 1st Bank of Paducah, KY accounts	F	X	INTEREST	VI	
	Sun America Money Mkt	L	X	DIVIDENDS	III	
	Springfield Institute for Savings	C	X	INTEREST	II	
	Springfield, MA Credit Union	B	X	INTEREST	II	
	Congressional Federal Credit Union	B	X	INTEREST	II	
	City of Springfield Retirement Fund	C	X	DIVIDENDS	NA	

For additional assets and unearned income, use next page.

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Invest to Compete Alliance	July 2-July 5	Springfield to Chatham MA by private auto	Y	Y	Yes (son)	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A

For use by Members, officers, and employees

RECEIVED
PUBLIC RECORDS INSPECTION CENTER
00 MAY 15 PM 6:22

(9)

George R. Nethercutt, Jr.
(Full Name)

1527 Longworth House Office Bldg.
Washington, D.C. 20515
(Mailing Address)

(202) 225-2006
Daytime Telephone

M HAND DELIVERED
(Office Use Only)

Filer Status	☒ Member of the U.S. House of Representatives — State ____ District ____	☐ Officer or Employee — Employing Office ____	A *$200 penalty* shall be assessed against anyone who files more than 30 days late.
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☒	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☐	No ☒
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☒	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☐	No ☒
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date *(Month, Day, Year)*
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	George R. Nethercutt, Jr.	5/15/00

3182

Name George R. Nethercutt, Jr. | Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	United States Senate	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
Examples: XYZ Magazine	Article	Aug. 13, 1999	$500
None	NA	NA	NA

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income
For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction
Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

Block A		Block B	Block C																																			Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:* SP Mega Corp Stock					X								X																								P
	Simon & Schuster		Indefinite																	Royalties				X						X								
	1st Bank of Paducah, KY accounts						X									X										X												
	E. 706 Highland Blvd - Spokane WA							X							X											X												
	FenMar Partnership - Summerville S.C.														X											X												
	Midwest Diamond Baseball Club Ltd. Partnership			X										partnership income																								
	Carolina Diamond Baseball Club Ltd. Partnership				X									partnership income																								
	1927 Yankees Investment Club			X										X		X	X							X														
	Van Kampen American Trust American Pace Fund			X										NA - IRA							NA																

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name George R. Netherceutt Jr. | Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Dean Witter Amer. Value Fund					X								NA		-	IRA				NA											
SP	Dean Witter Amer. App. Fund				X									NA		-	IRA				NA											
	Cap. Gdn Trust Co Growth Fund of America				X									NA		-	IRA				NA											
SP	Cap. Gdn Trust Co New Perspective Fund				X									NA		-	IRA				NA											
	Cap Gdn Trust Co American Mutual Fund					X								NA		-	IRA				NA											
	Cap. Gdn. Trust Co. Eurpacific Growth Fund				X									NA		-	IRA				NA											
	Cap. Gdn Trust Co New Perspective Fund				X									NA		-	IRA				NA											
	Piper Jaffray Money market			X										NA		-	IRA				NA											
	Congressional Fed. Credit Union			X												X								X								
SP	U.S. Senate Fed. Credit Union			X												X																
	Thrift Savings Acct. - U.S. House			X										NA		-	IRA				NA											

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SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	None	NA				NA									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Washington Mutual Bank - Spokane, WA	Mortgage on E. 706 Highland Blvd., Spokane, WA				X						
	Washington Trust Bank - Spokane, WA	line of credit		X								
	Wachovia National Bank, Summerville S.C.	Fan Mar Mortgage 200 N. Main Summerville, S.C.		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None	NA	NA

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	None		NA →				

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Limited Partner	Midwest Diamond Baseball Club, Carolina Diamond Baseball Club
Partner	1927 Yankees Investment Club

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	None	NA

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 15 PM 6:05

(9)

HAND DELIVERED
MC
(Office Use Only)

Robert William Ney (Full Name)
112 Overlook Court St. Clairsville, Ohio 43950 (Mailing Address) 202-225-6265 (Daytime Telephone)

Filer Status	[X] Member of the U.S. House of Representatives	State Ohio District 18th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [ ] No [X]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Robert W. Ney	5/14/00

Name Robert W. Ney	Page 2 of 9

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontano County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II.

Name Robert W. Ney | Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	NONE			

This page may be copied if more space is required.

Name Robert W. Ney

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock					X							X																		P
			Simon & Schuster			Indefinite															Royalties				X					X			
			1st Bank of Paducah, KY accounts						X								X									X							
	Savings Acct				X												X						X										
	Wright Patman																																
	Credit Union																																
	Wash D.C.																																

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Robert W. Ney

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	NONE																													

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SCHEDULE IV — TRANSACTIONS

Name Robert W. Ney

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
			PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	Asset															
SP	*Example:*	Mega Corporation Common Stock	X			10–12–99		X								
	NONE															

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Name ROBERT W. NEY | Page 2 of 9

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
me	MBNA	CREDIT CARD		X								
me	AMERICAN EXPRESS	" "		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	National Chem	Oct 15-17	Wash DC - Las Vegas - Washington	Y	Y	No	No
	Cashers Assoc		Airfare $671.47	$173.31	79.07		
	Keynote Speaker		Misc $24.27				

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RESOURCE CENTER RESOURCE CENTER
00 MAY 11 AM 10:00 MAY 11 AM 10:20

ANNE MEAGHER NORTHUP
(Full Name)

3340 LEXINGTON ROAD
(Mailing Address)

LOUISVILLE, KENTUCKY 40206

Daytime Telephone (502) 852-5129

HAND DELIVERED (9)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State KENTUCKY District 03	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Anne M. Northup	5/10/2000

3200

Name ANNE MEAGHER NORTHUP	Page 1 of 1

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	U.S. HOUSE OF REPRESENTATIVES	CONGRESSIONAL SALARY	$136,700
	RADIO SOUND, INC.	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II.

3201

Name ANNE MEAGHER NORTHUP	Page 1 of 1

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples.	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	-NONE TO REPORT-			

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3202

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Name ANNE MEAGHER NORTHUP

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X										X						
	BANC ONE COMMON STOCK							X							X												X						
SP	FIDELITY ASSET MGR.					X									X									X									
SP	FIDELITY CONTRAFUND					X									X										X								
SP	FIDELITY DEVEL. COMMUNIC.					X									X									X									
SP	FIDELITY DISCIPLINED EQUITY					X									X										X								
SP	FIDELITY ELECTRONICS					X									X									X									

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name ANNE MEAGHER NORTHUP

Page 2 of 2

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	FIDELITY HEALTHCARE				X									X									X									
SP	FIDELITY LOW PRICED STOCKS				X									X								X										
SP	FIDELITY NEW MILLENIUM				X									X									X									
SP	FIDELITY STOCK SELECTION				X									X										X								
JT	HARLEY DAVIDSON, INC.			X										X								X										
JT	MERRILL LYNCH M.M.				X									X											X							
SP	FIDELITY AGGRESSIVE GROWTH				X									X										X								
JT	PFIZER CS			X										X								X										
JT	COMPAQ CS			X										X								X										
JT	CLEAR CHANNEL CS			X																	X											
	WEINGARTEN (B) FUND (IRA)			X																	X											
SP	WEINGARTEN (B) FUND (IRA)			X																	X											
SP	RADIO SOUND, INC. CS										X			X															X			
SP	COMMONWEALTH BANK TUA						X							X									X									
	CS = COMMON STOCK																															

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Name ANNE MEAGHER NORTHUP

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	ROYAL GOLD COMMON STOCK		X		9-30-99	X									
SP	FIDELITY STOCK SELECTION M.F.	X			12-03-99	X									
SP	FIDELITY CONTRAFUND M. F.	X			12-22-99	X									
SP	FIDELITY NEW MILLENIUM M.F.	X			12-17-99	X									
SP	FIDELITY DISCIPLINED M.F.	X			12-03-99	X									
SP	FIDELITY SELECT ELECTRONICS M.F.	X			12-10-99	X									
SP	FIDELITY SELECT DEVEL. COMMUNICATIONS M.F.	X			12-17-99	X									
SP	FIDELITY AGGRESSIVE GROWTH M.F.	X			12-17-99	X									
SP	COMMONWEALTH BANK TUA	X			12-20-99			X							

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Name ANNE MEAGHER NORTHUP

Page 1 of 1

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	-NONE TO REPORT-											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
-NONE TO REPORT-		

Use additional sheets if more space is required.

Name	Page 1 of 1
ANNE MEAGHER NORTHUP	

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	ASSOC. EQUIPMENT DEALERS	JAN. 15-17	LOUISVILLE-SAN DIEGO-LOUISVILLE	Y	Y	Y	N

This page may be copied if more space is required.

Name ANNE MEAGHER NORTHUP	Page 1 of 1

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	-NONE TO REPORT-

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	-NONE TO REPORT-	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 15 AM 9:53

HAND DELIVERED
(Office Use Only)

Eleanor Holmes Norton
(Full Name)

10 Ninth Street, SE
(Mailing Address)

202/225-8050
Daytime Telephone

Washington, D.C. 20003

Filer Status	[X] Member of the U.S. House of Representatives — State D.C. District ____	[ ] Officer or Employee	Employing Office ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date ____

A ***$200 penalty*** **shall be assessed against anyone who files more than 30 days late.**

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Eleanor Norton	5/12/00

3209

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Georgetown University	Approved Teaching Fee	$8,112*
	Pitney Bowes (not subject to the limit on outside earned income)	Retirement Fee	$12,000

For payments to charity in lieu of honoraria, use Schedule II.

* Amount paid in FY 1999

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Asset and/or Income Source		Value of Asset	Type of Income	Amount of Income	Transaction
SP, DC, JT	*Examples:*	SP	Mega Corp. Stock	DIVIDENDS	$1,001 – $2,500	P
			Simon & Schuster	RENT	$100,001 – $1,000,000	
			1st Bank of Paducah, KY accounts	INTEREST	$15,001 – $50,000	
	Congressional Federal Credit Union		$1,001 – $15,000	INTEREST	$1,001 – $2,500	
	Boston Capital Private Tax Credit Fund		$1,001 – $15,000	INTEREST	$201 – $1,000	
	Intergen Investors, Ltd.		$15,001 – $50,000		None	

Block B	Block C	Block D
A None	DIVIDENDS	I None
B $1 – $1,000	RENT	II $1 – $200
C $1,001 – $15,000	INTEREST	III $201 – $1,000
D $15,001 – $50,000	CAPITAL GAINS	IV $1,001 – $2,500
E $50,001 – $100,000	EXCEPTED TRUST	V $2,501 – $5,000
F $100,001 – $250,000	QUALIFIED BLIND TRUST	VI $5,001 – $15,000
G $250,001 – $500,000	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	VII $15,001 – $50,000
H $500,001 – $1,000,000		VIII $50,001 – $100,000
I $1,000,001 – $5,000,000		IX $100,001 – $1,000,000
J $5,000,001 – $25,000,000		X $1,000,001 – $5,000,000
K $25,000,001 – $50,000,000		XI Over $5,000,000
L Over $50,000,000		

Asset and/or Income Source	SP	DC	JT	A	B	C	D	E	F	G	H	I	J	K	L	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	Transaction
Mega Corp. Stock	SP							X								X										X								P
Simon & Schuster					Indefinite																	Royalties									X			
1st Bank of Paducah, KY accounts									X									X										X						
Congressional Federal Credit Union						X												X								X								
Boston Capital Private Tax Credit Fund						X												X							X									
Intergen Investors, Ltd.							X																X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Eleanor Holmes Norton

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	MERRILL																															
	CMA Tax-Exempt				X											X							X									
	Romeo, MI Community				X															OID*			X									
	School District																															
	Indiana Univ. Revs.			X																OID			X									
	Student																															
	Cook Co., IL School				X															OID				X								
	District																															
	LG&E Energy Corp.	X												X									X									S
	Davis NY Venture Fd.						X							X									X									
	Davis NY Venture Fd.				Same		Asset										X							X								
	ROYAL ALLIANCE																															
	Synthetic Indus., LP				X																X											
	Alliance Premier					X											X									X						
	Growth Fund Cl. C																															
	Fidelity Advisor	X															X							X								S
	Growth Opp. Fd. C																															
	Mass. Inv. Growth					X											X									X						
	Stock Fund Cl. C																															
	MFS Emerging Growth					X											X						X									
	Fund Class C																															

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* Original Issue Discount

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Eleanor Holmes Norton

Page 5 of 8

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income												BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Style Select Agg. Growth Port. Cl. II					X															X												P
	Anchor Nat'l Life Ins. Annuity Seas.					X										X										X							
	RTC Cash Acct.		X													X						X											
	High Equity Partners Series 85			X										X								X											
	High Equity Partners Series 86			X										X								X											
	Tech. Funding Vent. Partners IV			X																	X												
	Tech. Funding Vent. Partners V				X																X												
	WestMed 1 LP	X												X									X										S
	Met Life Pension Ann.			X										Income yet to be derived																			
	TIAA-CREF	Indefinite												Income yet to be derived																			

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SCHEDULE IV — TRANSACTIONS

Name Eleanor Holmes Norton

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	LG&E Energy Corp.		X		12/31/99	X									
	Davis NY Venture Fund A	X			12/02/99	X				(dividend reinv.)					
	Fidelity Advisor Growth Opp. Fd. C		X		12/08/99			X							
	Style Select Agg. Growth Port. II	X			12/09/99			X							
	Alliance Premier Growth Fd. Cl. C	X			12/15/99	X				(capital gains reinv.)					
	Mass. Inv. Growth Stock Fd. Cl. C	X			12/17/99	X				(capital gains reinv.)					
	MFS Emerging Growth Fund Cl. C	X			12/17/99	X				(capital gains reinv.)					

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	3/19-3/21	DC - Hershey, PA - DC	Y	Y	N	N
	Governors State University	6/6	DC - University Park, IL - DC	N	N	N	N
	Skinner Farm Leadership Inst.	7/8-7/11	DC - Bal Harbour, FL - DC	Y	Y	N	N
	Maine Democratic Party	8/14-8/16	DC - Martinville, ME - DC	Y	Y	N	N

This page may be copied if more space is required.

Name Eleanor Holmes Norton	Page 8 of 8

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
	Please see attached exhibit

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
7/23/99	Georgetown University	Extended leave of absence from position as Professor of Law
	Please see attached Letter of approval and letter of agreement.	Part-time faculty appointment to teach a seminar in 1999-2000 academic year

Use additional sheets if more space is required.

GEORGETOWN UNIVERSITY LAW CENTER

July 19, 1999

Office of the Dean

The Honorable Eleanor Holmes Norton
U. S. House of Representatives
1424 Longworth House Office Building
Washington, D. C. 20515

Dear Eleanor:

I am delighted that you have agreed to teach a seminar at the Law Center during the 1999-2000 academic year. This letter confirms the terms of your faculty appointment.

Consistent with Georgetown University's faculty leave policy, your leave of absence from the full-time faculty has been extended through June 30, 2000.

Your seminar will be offered as part of the regular J.D. program of instruction at the Law Center. Students will receive regular credit toward their law degrees for their attendance and participation in your seminar.

Your salary will be $10,200, which will be paid out of Law Center operating funds. No federal funds will be devoted to your salary. The compensation you will receive does not exceed the salary the Law Center pays to those whose professional qualifications are similar to yours and who provide a comparable level of instruction and amount of work. Barbara Duncan, administrative officer in charge of Law Center payroll, will contact you regarding arrangements for payment.

Enclosed is a copy of the 1999-2000 Law Center academic calendar. If you have any questions about the scheduling of your seminar, please contact Assistant Dean Carol O'Neil at (202) 662-9041.

You are eligible to hire a student research assistant to assist in preparation of the seminar materials. The student will be paid out of Law Center operating funds.

Sincerely,

Judith Areen
Dean

Understood and accepted.

ELEANOR HOLMES NORTON

7/23/99
Date

600 New Jersey Avenue NW Washington DC 20001-2075
202-662-9030 FAX 202-662-9055

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CHIEF COUNSEL/STAFF DIRECTOR
JOHN W. LAMPMANN,
ASSISTANT TO THE CHAIRMAN
BARI L. SCHWARTZ,
COUNSEL TO THE RANKING
MINORITY MEMBER

ONE HUNDRED SIXTH CONGRESS

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515–6328

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SUITE HT-2 THE CAPITOL
(202) 225-7103

August 4, 1999

The Honorable Eleanor Holmes Norton
U.S. House of Representatives
1424 Longworth House Office Building
Washington, D.C. 20515

Dear Colleague:

This is to notify you of Committee approval of your request of July 23, 1999, to teach a course for compensation this fall at Georgetown University Law Center. With your letter you enclosed a copy of a letter from the Dean of the Law Center. Your letter states that you have taught this course since 1991, and that you will use no official House resources, including staff time, in teaching this course.

These arrangements appear to be similar to those that the Committee has approved in each of the past several years, pursuant to the guidelines issued by the Committee on teaching by Members and senior staff. As noted previously, your teaching compensation is subject to the 15 percent outside earned income limit of House Rule 26, clauses 1-4. For 1999, that limit is $20,505. The income must also be reported on your annual Financial Disclosure Statement.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Lamar Smith
Chairman

Howard L. Berman
Ranking Minority Member

LS/HLB:rds

Congresswoman Eleanor Holmes Norton's 1999 Board Participation

Position	Name of Organization
Professor of Law*	Georgetown University
Member	Council on Foreign Relations
Member	Citizens Commission for Civil Rights
Member of the Board	Economic Policy Institute
Member of the Board	Environmental Law Institute
Member of the Board	Lawyers Committee for Civil Rights Under Law
Member of the Board	Washington Symphony
Chair	Women's Law and Public Policy Fellowship Program
Member of the Board	Work In America Institute

ADVISORY BOARDS

Advisory Board Member	Patriots' Trail Girl Scout Council, Inc.
Advisory Board Member	Millennium Arts Center, Inc.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 JUN 14 PM 3:40

HAND DELIVERED (8)

(Office Use Only)

Charles W. Norwood
(Full Name)

3914 Mulliken Rd.
(Mailing Address)

(202) 225-4101
Daytime Telephone

Evans, GA 30809

Filer Status	[X] Member of the U.S. House of Representatives — State Georgia District 10	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		6/14/00

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Name	CHARLES W. NORWOOD	Page 2 of 8

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	REXALL - SPOUSE INCOME	SPOUSE - MISC INCOME	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: Transaction (P, S, E)
SP, DC, JT	Examples:	SP	Mega Corp Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	Congressional Fed Credit Union			X													X						X										
	Suntrust Bank (2 accts)					X											X							X									
	Note Receivable-Dr. Fred Thielke						X										X									X							
	Lowndes Co. GA - 61 acres						X														Pine Straw				X								
	Belair Rd. - Wrightsboro Rd. -																																
	Augusta GA 1/2 int raw land									X												X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CHARLES W. NORWOOD

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Northwestern Ins Annuity					X								X							X										
	Smith Barney - Money Funds		X											X								X									
	Enamelon, Inc.		X											X							X										
SP	Smith Barney - Money Funds		X											X								X									
	Funds previously held in																														
	Liquid Capital Inc. Trust																														
SP	General Electric Co.			X										X								X									P
SP	Home Depot, Inc.			X										X								X									
SP	Lucent Technologies Inc.			X										X								X									
	Smith Barney Money Funds		X											X								X									
	Bank of America Corp.			X										X								X									
	Coca Cola Co.			X										X								X									
	Enamelon Inc.		X											X							X										
	General Electric Co.			X										X								X									
	IBM Corp			X										X								X									P
	Building-Land Walton Way West								X						X													X			P
	Purchased remaining interest																														
	from Partnership																														
	Price Communications - S	X												X							X										S
SP	Compaq Computer Corp - S	X												X								X									S
SP	Lucent Technologies Inc - S	X												X								X									S
*	Personal Residence excluded																														

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SCHEDULE IV — TRANSACTIONS

Name CHARLES W. NORWOOD

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Bowers & Norwood Leasing - Purchase Remaining Interest in Partnership	X			6-21-99				x						
SP	General Electric - Common Stock	x			10-19-99	x									
	IBM Corp - Common Stock	x			10-19-99	x									
SP	Compaq Computer Corp- Common Stock		x		10-19-99	x									
SP	Lucent Technologies, Inc. - Common Stock		x		10-26-99	x									
	Price Communications - Common Stock		x		10-19-99	x									

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Name CHARLES W. NORWOOD

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				x						
	Suntrust Bank	Mortgage on Rental Property					x					

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
Awakenings 1999	Jan 8-10, 1999	Augusta, GA-Sea Island, GA-Augusta	y	y	y	n
Indiana Dental Association	May 14-15, '99	DC - Indianapolis, IN - DC	y	y	y	n
Georgia Dental Association	Jul 23-26,1999	DC - Hilton Head, SC - DC	y	y	y	n
American College of Dentists	Oct 8-12, 1999	DC - Honolulu, HI - DC	y	y	n	n

This page may be copied if more space is required.

Name	CHARLES W. NORWOOD	Page 8 of 8

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Partner	Bowers and Norwood Leasing - Partner thru 6-21-99

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CO MAY 15 PM 2:43

(9)

Jim Nussle
(Full Name)

303 Cannon House Office Building
(Mailing Address)

(202)225-2911
Daytime Telephone

Washington, DC 20515

MC HAND DELIVERED
(Office Use Only)

Filer Status	[ ] Member of the U S House of Representatives	State Iowa District 2nd	[ ] Officer or Employee	Employing Office
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [x]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [x]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [x]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [x]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [x]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [x]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [x]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [x]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [x]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		May 15, 2000

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset												Block C: Type of Income							Block D: Amount of Income											Block E: Transaction
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples:*	SP	Mega Corp Stock				X								X										X									P
			Simon & Schuster			Indefinite															Royalties									X				
			1st Bank of Paducah, KY accounts					X									X										X							
	US Savings Bonds (See Attached)			X													X					X												

For additional assets and unearned income, use next page.

SCHEDULE IV — TRANSACTIONS

Name Jim Nussle

Page 3 of 4

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
			PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	Asset															
SP	*Example:*	Mega Corporation Common Stock	X			10–12–99		X								
	(See Attached)															

This page may be copied if more space is required.

Name	Jim Nussle	Page 4 of 4

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Farmers and Merchants Savings Bank Manchester, Iowa	Mortgage on primary home (1220 Norht 6th Street Manchester, Iowa)			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold.

Note: The gift rule (House Rule 51, re-numbered as clause 5 of House Rule 26 in the 106th Congress) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCI CAPITAL MANAGEMENT

REALIZED GAINS AND LOSSES

From 12-31-98 Through 12-31-99

Open Date	Close Date	Quantity	Security	Cost Basis	Proceeds	Gain Or Loss Short Term	Gain Or Loss Long Term
07-12-99	07-23-99	450	Yankee Energy Sys Inc	1.00	17,915.03	17,914.03	
07-12-99	07-26-99	150	Bristol Myers Squibb	0.50	10,546.52	10,546.02	
07-12-99	07-26-99	45	Mobil Corp	0.38	4,609.53	4,609.16	
07-26-99	07-29-99	150	Service Corp Intl	2,428.13	2,273.92	-154.21	
07-30-99	08-25-99	25	Providian Financial Corp	2,234.38	2,193.67	-40.71	
07-12-99	08-30-99	75	Mobil Corp	0.63	7,748.18	7,747.56	
07-12-99	08-30-99	67	Monsanto Co	1.00	2,851.59	2,850.59	
07-12-99	08-30-99	150	New Century Energies Inc Corn	1.00	5,418.56	5,417.56	
07-13-99	09-15-99	125	Bergen Brunswig Corp	1,929.69	1,582.08	-347.61	
08-30-99	09-15-99	75	Ingram Micro Inc	1,959.38	1,101.52	-857.86	
08-30-99	09-15-99	75	SaksInc	1,335.94	1,223.95	-111.99	
01-01-99	09-16-99	170	Pfizer	6,999.22	6,141.04	-858.18	
01-01-98	09-20-99	1	Firstar Corp	10.34	12.89		2.55
10-15-92	10-15-99	5,000	United States Treas Nis 6.000% Due 10-15-99	5,000.00	5,000.00		0.00
01-01-98	10-20-99	346	Firstar Corp	6,503.72	8,995.70		2,491.98
07-13-99	11-01-99	50	Albertson's Inc	2,675.00	1,768.69	-906.31	
09-16-99	11-01-99	25	Albertson's Inc	1,146.88	884.35	-262.53	
08-30-99	12-01-99	1	Honeywell International Inc	46.43	47.06	0.63	
07-22-99	12-06-99	50	Xerox	2,525.00	1,306.21	-1,218.79	
09-16-99	12-06-99	25	Xerox	1,062.50	653.10	-409.40	
TOTAL GAINS						49,085.54	2,494.54
TOTAL LOSSES						-5,167.59	0.00
[illegible]				[illegible]	[illegible]	[illegible]	[illegible]

TOTAL REALIZED GAIN/LOSS 46,412.49

SCI CAPITAL MANAGEMENT

PORTFOLIO APPRAISAL

December 31, 1999

Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Yield
CASH AND EQUIVALENTS							
	Accrued Dividend		207.26		207.26	0.10	0.00
	Cash		2,353.75		2,353.75	1.20	4.80
			2,561.01		2,561.01	1.30	4.40
GOVERNMENT BONDS							
10,000	United States Treas Nts 5.625% Due 02-28-01	100.00	10,000.00	99.41	9,940.63	5.00	5.70
	Accrued Interest				188.53	0.10	
			10,000.00		10,129.16	5.10	5.70
FEDERAL HOME LOAN BANK							
25,000	Federal Home Loan Mtg Co 6.000% Due 06-11-06	98.30	24,575.00	97.00	24,250.00	12.20	6.20
	Accrued Interest				83.33	0 00	
			24,575.00		24,333.33	12.20	6.20
COMMON STOCK							
Capital Goods							
50	General Elec Co	110.28	5,514.06	154.75	7,737.50	3.90	0.90
93	Honeywell International Inc	61.45	5,714.62	57.69	5,364.94	2.70	1.20
200	Tyco International Ltd	44.30	8,859.38	39.00	7,800.00	3.90	0.10
			20,088.06		20,902.44	10.50	0.70
Communication Services							
25	At&t Corp	50.63	1,265.63	50.81	1,270.31	0.60	1.70
50	Lucent Technologies	69 84	3,492.19	75.00	3,750.00	1.90	0.10
113	MCI Worldcom Inc	53.90	6,064.06	53.06	5,969.53	3.00	0.00
100	Tellabs Inc	58.44	5,843.75	64.19	6,418.75	3.20	0.00
			16,665.63		17,408.59	8.80	0.10
Consumer Cyclical							
125	Carnival Corp	41.48	5,184.38	47.81	5,976.56	3.00	0.80
75	Tandy Corp	49.50	3,712.50	49.19	3,689.06	1.90	0.40
			8,896.88		9,665.63	4.90	0.60
Consumer Staples							
75	Conagra Inc	24.69	1,851.56	22.69	1,701.56	0.90	3.60
100	Pepsico Inc	38.19	3,818.75	35.25	3,525.00	1.80	1.50
			5,670.31		5,226.56	2.60	2.20
Energy							

Quantity	Security	Unit Cost	Total Cost	Price	Market Value	Pct. Assets	Yield
50	Chevron Corporation	92.47	4,623.44	86.63	4,331.25	2.20	3.00
Financials							
50	Bank of America Corp	67 69	3,384.38	50.19	2,509.38	1.30	4.00
50	Chase Manhattan	79.81	3,990.62	77.69	3,884.38	2.00	2.10
100	Citigroup Inc	44.94	4,493.75	55.69	5,568.75	2.80	1.00
75	Fannie Mae	66.25	4,968.75	62.44	4,682.81	2.40	1.70
850	Firstar Corp	19.90	16,913.85	21.13	17,956.25	9.00	3.10
			33,751.35		34,601.56	17.40	2.50
Health Care							
100	Abbott Labs	42.53	4,253.13	36.31	3,631.25	1.80	1.90
175	Alza Corp	31.88	5,578.13	34.63	6,059.38	3.10	0.00
150	Bristol Myers Squibb	0.00	0.50	64.19	9,628.13	4.80	1.50
100	Schefing Plough Corp	48.41	4,840.63	42.38	4,237.50	2.10	1.20
			14,672.39		23,556.25	11.90	1.10
Technology							
50	BMC Software Inc	62.06	3,103.13	79.94	3,996.88	2.00	0.00
100	Compaq Computer Corp	23.38	2,337.50	27.06	2,706.25	1.40	0.40
100	Computer Assoc Intl	53.00	5,300.00	69.94	6,993.75	3.50	0.10
75	First Data Corp	46.58	3,493.75	49.31	3,698.44	1.90	0.20
100	Intel Corp	82.41	8,240.63	82.31	8,231.25	4.10	0.10
200	Sun Microsystems Inc	38.08	7,615.63	77.44	15,487.50	7.80	0.00
50	Texas Instruments	81.81	4,090.63	96.63	4,831.25	2.40	-0.20
			34,181.27		45,945.31	23.10	0.10
			138,549.33		161,637.59	81.40	1.00
TOTAL PORTFOLIO			175,685.34		198,661.09	100.00	1.90

SCI CAPITAL MANAGEMENT

INCOME AND EXPENSES

From 12-31-98 Through 12-31-99

Ex-Date	Pay-Date	Security	Amount
CASH AND EQUIVALENTS			
08/18/99	08/18/99	Money Market Fund	71.65
09/15/99	09/15/99	Money Market Fund	63.09
10/26/99	10/26/99	Money Market Fund	30.07
11/19/99	11/19/99	Money Market Fund	44.75
12/30/99	12/30/99	Money Market Fund	21.05
			230.61
GOVERNMENTBONDS			
07/12/99	07/12/99	United States Treas Nts 6.000% Due 10-15-99	-72.13
07/12/99	07/12/99	United States Treas Nts 5.625% Due 02-28-01	-206.35
08/31/99	08/31/99	United States Treas Nts 5.625% Due 02-28-01	281.25
10/15/99	10/15/99	United States Treas Nts 6.000% Due 10-15-99	150.00
			152.77
FEDERAL HOME LOAN BANK			
07/13/99	07/14/1999	Federal Home Loan Mtg Co 6.000% Due 06-11-06	-82.50
09/16/99	09/17/1999	Federal Home Loan Mtg Co 6.000% Due 06-11-06	-160.00
			-242.50
COMMON STOCK			
07/21/99	08/15/1999	New Century Energies Inc Corn	87.00
07/28/99	08/25/1999	Fannie Mae	13.50
07/28/99	09/01/1999	Lucent Technologies	0.50
07/29/99	09/01/1999	Bergen Brunswig Corp	9.38
07/29/99	08/27/1999	Citigroup Inc	7.00
08/05/99	09/10/1999	Mobil Corp	42.75
08/12/99	09/10/1999	Monsanto Co	2.01
08/18/99	09/10/1999	Chevron Corporation	15.25
08/27/99	09/14/1999	Carnival Corp	4.50
08/30/99	10/01/1999	Mercantile Bancorportn	17.00
09/01/99	09/24/1999	Bank of America Corp	22.50
09/01/99	10/01/1999	Xerox	10.00
09/08/99	09/30/1999	Pepsico Inc	10.13
09/15/99	09/15/1999	Bristol Myers Squibb	64.50
09/15/99	10/15/1999	Firstar Corp	54.20
09/28/99	11/01/1999	At&t Corp	5.50
09/28/99	10/20/1999	Compaq Computer Corp	2.00
09/28/99	10/25/1999	General Elec Co	17.50
09/29/99	11/01/1999	Bristol Myers Squibb	32.25
09/29/99	10/15/1999	First Data Corp	1.50

Ex-Date	Pay-Date	Security	Amount
09/29/99	11/01/1999	Tyco International Ltd	1.25
11/01/1999	11/01/1999	Chase Manhattan	20.50
11/10/1999	11/10/1999	Albertson's Inc	13.50
11/15/1999	11/15/1999	Abbott Labs	17.00
11/19/1999	11/19/1999	Firstar Corp	-54.2
11/22/1999	11/22/1999	Texas Instruments	2.13
11/23/99	11/29/1999	Honeywell International Inc	14.50
11/24/1999	11/24/1999	Citigroup Inc	14.00
11/25/1999	11/25/1999	Fannie Mae	20.25
11/30/1999	11/30/1999	Schering Plough Corp	12.50
12/01/99	12/23/1999	Bank of America Corp	25.00
12/01/99	12/01/1999	Conagra Inc	15.26
12/01/99	12/01/1999	Intel Corp	3.00
12/01/99	12/01/1999	Lucent Technologies	1.00
12/01/99	01/01/2000	Xerox	15.00
12/08/99	01/03/2000	Pepsico Inc	13.50
12/10/99	12/10/1999	Chevron Corporation	32.50
12/14/99	12/14/1999	Carnival Corp	13.13
12/20/99	01/10/2000	Computer Assoc Intl	4.00
12/22/99	01/25/2000	General Elec Co	20.50
12/29/99	02/01/2000	At&t Corp	5.50
12/29/99	01/20/2000	Compaq Computer Corp	2.50
12/29/99	01/15/2000	Firstar Corp	138.13
12/30/99	01/14/2000	First Data Corp	1.50
12/30/99	01/19/2000	Tandy Corp	4.13
12/30/99	02/01/2000	Tyco International Ltd	2.50
			777.55

AFTER FEE PERFORMANCE EXPENSE ACCOUNTS

07/31/99	07/31/99	Sci Advisory Fees	146.02
08/31/99	08/31/99	Sci Advisory Fees	239.78
09/30/99	09/30/99	Sci Advisory Fees	367.09
10/31/99	10/31/99	Sci Advisory Fees	417.14
11/30/99	11/30/99	Sci Advisory Fees	419.08
12/31/99	12/31/99	Sci Advisory Fees	413.88
			2,002.99

NET INCOME	+	[illegible]

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HAND DELIVERED

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

James L. Oberstar
(Full Name)

2365 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202/225-6211

Filer Status	[X] Member of the U S House of Representatives	State MN District 08	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	X	
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (I e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	X	
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S.C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	James L. Oberstar	5-15-00

Name James L. Oberstar	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Kurth & Company	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year Exclude Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	BLOCK B **Value of Asset** at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description iin this block	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Cong Federal Credit Union	$15,001 - $50,000	Interest	$2,501 - $5,000	NA
	Cong. Federal Credit Union (IRA)	$1 - $1,000	Interest	$1 - $200	NA
	Chevy Chase Bank	$1 - $1,000	Interest	$1 - $200	NA
SP	Kurth & Co (Money Purchase Retirement Fund)	$1,000,001 - $5,000,000	NA	$15,001 - $50,000	NA
SP	Kurth & Co (Defined Benefit Retirement Fund)	$500,001 - $1,000,000	NA	$5,001 - $15,000	NA
SP	Kurth By Pass Trust	Excepted Trust	Excepted Trust	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Kurth QTip A	Excepted Trust	Excepted Trust	None	NA
SP	Prudential Money Fund	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Fedders Corp. Class A	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP	GRC Int'l Inc.	$15,001 - $50,000	Dividends	None	NA
SP	Iron Mountain	$50,001 - $100,000	Dividends	None	NA
SP	Johnson & Johnson	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Midcast Energy Resources	$50,001 - $100,000	Dividends	$201 - $1,000	P
SP	NBC Internet Inc.	$15,001 - $50,000	Dividends	None	NA
SP	Penn National Gaming	$15,001 - $50,000	Dividends	None	P
SP	Pharmaceutical Resources	$15,001 - $50,000	Dividends	None	P
SP	Pharmakinetics Labs	$1,001 - $15,000	Dividends	None	S
SP	Reptron Electronics	$15,001 - $50,000	Dividends	None	P AND S
SP	Unisys Corp.	$50,001 - $100,000	Capital Gains	$50,001 - $100,000	Partial Sale & Purchase
SP	Vitesse Semiconductor	$100,001 - $250,000	Capital Gains	$15,001 - $50,000	Patrial Sale & Purchase
SP	Xicor	$50,001 - $100,000	Dividends	None	NA
SP	Safeway Inc. Sr Sub Debentures	$15,001 - $50,000	Interest	$1,001 - $2,500	NA
SP	Digens Corp	$15,001 - $50,000	Dividends	None	P
SP	C & D Technologies	$100,001 - $250,000	Dividends	$201 - $1,000	NA
SP	Harbinger Corp.	$15,001 - $50,000	NA	None	NA

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Iron Mountain	$50,001 - $100,000	NA	None	NA
SP	Pharmaceutical Resources	$1,001 - $15,000	NA	None	NA
SP	Saul Centers	$15,001 - $50,000	Dividends	$2,501 - $5,000	NA
SP	Scan Optics Inc	$1,001 - $15,000	NA	None	NA
SP	Stevens Intl Class A	$1,001 - $15,000	NA	None	NA
SP	Xicor	$15,001 - $50,000	NA	None	NA
SP	Arch Communications Bond	$15,001 - $50,000	Interest	$5,001 - $15,000	NA
SP	Astec Tech. Partners	None	NA	None	S
SP	Navigant Intl	None	NA	None	S
SP	School Specialty	None	NA	None	S
SP	US Office Products	None	NA	None	S
SP	Workflow Managment	None	NA	None	S
SP	Harbinger Corp.	$15,001 - $50,000	NA	None	P
SP	Iron Mountain	$1,001 - $15,000	NA	None	NA
SP	Johnson & Johnson	$1,001 - $15,000	NA	$1 - $200	NA
SP	Penn National Gaming	$1,001 - $15,000	NA	None	P
SP	Pharmaceutical Resources	$1,001 - $15,000	NA	None	P
SP	Saul Centers	$1,001 - $15,000	Dividends	$1,001 - $2,500	NA
SP	Unisys	$1,001 - $15,000	NA	None	P

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Xerox	None	NA	None	S
SP	Reptron	None	NA	None	S
SP	ORyan Capital	None	Capital Gains	$201 - $1,000	S
SP	LeCroy	None	NA	None	S
SP	JKO Inc	$50,001 - $100,000	NA	None	NA
SP	Southview & Prince William	$15,001 - $50,000	Rent	None	NA
SP	2402 37th St., NW, Wash., DC (50%)	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
SP	Paine Webber	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	Smith Barney Managed Money Fund	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
JT	Smith Barney Managed Money Fund	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
	Prudential	$15,001 - $50,000	Dividends	$1,001 - $2,500	NA
	US Treasury Notes	$15,001 - $50,000	Interest	$1,001 - $2,500	NA
SP	Pioneer Growth Class B	$50,001 - $100,000	Dividends	$5,001 - $15,000	P
SP	John Hancock Regional bank fund Class B	$100,001 - $250,000	Dividends	$15,001 - $50,000	P
SP	John Hancock Regional Class B	$50,001 - $100,000	Dividends	$5,001 - $15,000	P
SP	Vista Mutual Fund	$250,001 - $500,000	Dividends	$15,001 - $50,000	P
SP	Great Hall Money Market	$1,001 - $15,000	Dividends	$201 - $1,000	NA
SP	Kemper High Yield	$15,001 - $50,000	Dividends	$2,501 - $5,000	P
SP	Zurick Money Fund	$1,001 - $15,000	Dividends	$201 - $1,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Johnson & Johnson	$15,001 - $50,000	Dividends	$201 - $1,000	NA
SP	Penn Natl Gaming	$15,001 - $50,000	NA	None	P
SP	Reptron Electronics	$15,001 - $50,000	NA	None	P
SP	Saul Centers	$1,001 - $15,000	Dividends	$1,001 - $2,500	NA
SP	Stevens Intl Class A	$1 - $1,000	NA	None	NA
SP	Unisys Corp.	$50,001 - $100,000	Capital Gains	$15,001 - $50,000	Partial Sale
SP	Starwood Hotels	None	Capital Gains	$2,501 - $5,000	S
SP	Pharmaceutical Resources	$1,001 - $15,000	NA	None	P
SP	Bethlehem Steel	None	NA	None	S
SP	LeCroy Corp.	None	Capital Gains	$2,501 - $5,000	S
SP	Trion Inc.	None	NA	None	S
SP	Xerox	None	Capital Gains	$2,501 - $5,000	S

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Unisys	Purchase	11-12-99	$1,001 - $15,000
SP	Xerox	Sold	11-12-99	$1,001 - $15,000
SP	Penn Natl	Sold	5-25-99	$1,001 - $15,000
SP	Reptron	Sold	5-18-99	LESS THAN $1,001
SP	Pharmaceutical Resources	Purchase	5-18-99	$1,001 - $15,000
SP	ORyan Capital	Sold	5-18-99	$1,001 - $15,000
SP	LeCroy	Sold	5-18-99	$1,001 - $15,000
SP	Harbinger Corp.	Purchase	5-19-99	$1,001 - $15,000
SP	Xerox	Sold	11-8-99	$15,001 - $50,000
SP	Xoom Com Exm	Purchase	11-8-99	$15,001 - $50,000
SP	Pioneer Growth Class B	Purchase	Dividend Reinvestment	$1,001 - $15,000
SP	John Hancock Regional	Purchase	Dividend Reinvestment	$15,001 - $50,000
SP	John Hancock Regional	Purchase	Dividend Reinvestment	$1,001 - $15,000
SP	Vista Mutual Fund	Purchase	Dividend Reinvestment	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Kemper High Yield	Purchase	Dividend Reinvestment	$1,001 - $15,000
SP	Penn Natl Gaming	Purchase	5-25-99	$15,001 - $50,000
SP	Reptron Electronics	Purchase	11-12-99	$1,001 - $15,000
SP	Unisys Corp	Sold	5-18-99	$15,001 - $50,000
SP	Starwood Hotels	Sold	11-8-99	$1,001 - $15,000
SP	Pharmaceutical Resources	Purchase	5-18-99	$15,001 - $50,000
SP	NBC Internet Inc A	Exchange	12-02-99	$15,001 - $50,000
SP	Xoom com Exm	Exchange	12-02-99	
SP	Digene	Purchase	12-30-99	$15,001 - $50,000
SP	Bethlehem Steel	Sold	11-8-99	$1,001 - $15,000
SP	Fedders corp Class A	Purchase	7-21-99	$15,001 - $50,000
SP	LeCroy Corp	Sold	5-19-99	$15,001 - $50,000
SP	MidCoast Energy Resources	Purchase	4 purchases in '99	$15,001 - $50,000
SP	Penn Natl Gaming	Purchase	5-25-99	$15,001 - $50,000
SP	Pharmaceutical Resources	Purchase	5-18-99	$15,001 - $50,000
SP	Pharmakentic Labs	Sold	12-30-99	$1,001 - $15,000

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SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	*Mega Corporation Common Stock*	*Purchase*	*10/12/1999*	*$15,001 - $50,000*
SP	Reptron Electronics	Purchase	11-9-99	$15,001 - $50,000
SP	Reptron Eclctronics	Sold	5-18-99	$1,001 - $15,000
SP	Trion Inc.	Sold	7-21-99	$15,001 - $50,000
SP	Unisys Corp.	Sold	3 sales in 1999	$50,001 - $100,000
SP	Unisys Corp	Sold	11-8-99	$15,001 - $50,000
SP	Vitesse Corp	Sold	11-8-99	$15,001 - $50,000
SP	Astec Technology Partners	Sold	5-20-99	LESS THAN $1,001
SP	Navigant Intl	Sold	5-20-99	" " "
SP	School Specialty	Sold	5-20-99	" " "
SP	US Office Products	Sold	5-20-99	" " "
SP	Workflow Management	Sold	5-20-99	" " "

Name James L. Oberstar	Page 1 of 1

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude. Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Organization
Honorary Board Member	George Washington University Medical Center, Cancer Center Advisory Board
Board of Trustees (Position by federal statute)	John F. Kennedy Center for the Performing Arts
Board of Trustees (Position by federal statute)	Int'l Institute for Surface Transportation Policy Studies

Name James L Oberstar | Page / of /

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	3/28-4-5-99	DC-China-DC	Y	Y	Y	None
Natl Scenic Byways Resource Center	8/25/99	DC-Louisville, KY	N	Y	N	None
Intl Inst. for Surface Tranportation Policy Studies, San Jose State Univ.	8/25-29/99	Louisville, KY-Sacramento/San Jose-DC	Y	Y	N	2
Bikes Belong Coalition	9/11-13-99	Las Vegas	Y	Y	N	None
Assn. of Asia Pacific Airlines	11/23-28-99	DC-Tokyo, Japan-DC	Y	Y	Y	1

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

David R. Obey
(Full Name)

2314 Rayburn House Office Bldg.
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-3365

Filer Status	[X] Member of the U.S. House of Representatives	State: WI District: 07	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5/15/00

3249

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
	Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT	*Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	Fidelity Trust	$15,001 - $50,000	(IRA)	NA	
	The Vandguard Group	$1,001 - $15,000	(Roth IRA)	NA	
SP	First Union National Bank	$1,001 - $15,000	(IRA)	NA	
SP	The Vandguard Group	$1,001 - $15,000	(IRA)	NA	
SP	The Vandguard Group	$1,001 - $15,000	(Roth IRA)	NA	
SP	U.S. Savings Bong Series EE	$1,001 - $15,000	(No income yet derived)	None	

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	U.S. Treasury Bill	$1,001 - $15,000	Interest	$201 - $1,000	
JT	Wright-Patman Congressional Federal Credit Union	$15,001 - $50,000	Interest	$1,001 - $2,500	

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute (Conference on improving educational opportunity for children for children with limited financial resources)	Feb. 12-20, 1999	Wash., DC-St. Petersburg, FL-Wash., DC	Y	Y	Y	6 days

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

John W. Olver
(Full Name)

Box 28
(Mailing Address)

Amherst, MA 01004

Daytime Telephone
225-5335

Filer Status	[xx] Member of the U S House of Representatives	State MA District 1	[ ] Officer or Employee — Employing Office
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [xx]	No [ ]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [xx]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [xx]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [xxx]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [xx]	No [ ]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [xx]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [xx]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII**	Yes [xx]	No [ ]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX**	Yes [xx]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent ch ld?	Yes [ ]	No [xx]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [xx]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S C app 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day Year
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John W. Olver	15 MAY 00

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples.	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Amherst College -- Amherst, MA	spouse salary	n/a

For payments to charity in lieu of honoraria, use Schedule II.

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Name JOHN OLVER

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None"

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp. Stock					X								X										X								P
DC	Simon & Schuster			Indefinite																Royalties								X				
JT	1st Bank of Paducah, KY accounts						X									X										X						
JT	AMCAP Fund				X									X			X							X								
JT	Carlyle Real Estate Ltd.			X												X	X						X									
JT	Canada So. Petroleum, Ltd.			X																	X											
JT	Magellan Petroleum Corp.			X																	X											
JT	33 Myrtle St., Boston, MA					X									X											X						
JT	120 acres unimproved land 117 Central St., Plainfield, MA					X															X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name John W. Olver

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
JT	Daily Cash Accum. Fund	C: X	DIVIDENDS: XX	II: X	
JT	27 acres unimproved land, Buffam Rd., Pelham, MA	E: X		I: X	
JT	45 acres unimproved land, Valley Rd., Pelham, MA	D: X		I: X	
JT	25 acres unimproved land, Beachlake, Berlin Twshp, PA	E: X		I: X	
SP	Fleet Bank, 1 S. Pleasant, Amherst, MA	D: X	INTEREST: X	III: X	
SP	Scudder NE mutual fund	C: X	DIVIDENDS: X; CAPITAL GAINS: X	III: X	
SP	Texas Instruments stock	C: X	DIVIDENDS: X	III: X	
SP	Monsanto Chem. Co. stock	C: X	DIVIDENDS: X	III: X	
	Mass. State Employee Pension	F: X	Other Type of Income (Specify): pension	VI: X	
SP	Mass. Fin Agency bonds	C: X	INTEREST: X	II: X	
SP	Mass. Water Resources bond	C: X	INTEREST: X	II: X	
JT	Compaq Computer stock	C: X	DIVIDENDS: X	II: X	
JT	CMGI stock	C: X		I: X	P
JT	Internet Capital stock	C: X		I: X	P
JT	Lycos stock	C: X		I: X	P
SP	Eastman Kodak stock	C: X	DIVIDENDS: X	II: X	

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SCHEDULE IV — TRANSACTIONS

Name John W. Olver

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10–12–99		X								
JT	Compaq Computer stock	x			4-19-99	x									
JT	CMGI stock	x			11-30-99	x									
JT	Internet Capital stock	x			11-30-99	x									
JT	Lycos stock	x			2-9-99	x									
JT	Lycos stock	x			3-5-99	x									

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SCHEDULE V — LIABILITIES

Name John W. Olver

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
JT	Fleet Bank, 1 Monarch Pl., Springfield, MA	mortgage on 33 Myrtle St. Boston, MA		x								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
Vice President	Americans for Democratic Action, 1625 K St., NW, Washington, DC 20006
alumni representative	MIT Visiting Committee for the Dept. of Political Science, Massachusetts Institute of Technology, 77 Mass. Ave., Cambridge, MA 02139-4307

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
6-14-91	Mass. State Employee Life Insurance Program	*continuing benefits as a former state employee
6-14-91	Mass. State Employee Retirement Program	retirement effective: Nov. 20, 1992

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF THE CLERK
00 MAY 15 PM 2:06

(9)

HAND DELIVERED
MC
(Office Use Only)

Solomon Porfirio Ortiz
(Full Name)

2136 Rayburn HOB, Washington, D.C. 20515 202/225-7742
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U S House of Representatives — State: Texas District: 27	[ ] Officer or Employee — Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app 4, § 104 and 18 U.S.C §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		MAY-15-00

3260

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Texas County and District Retirement System	Retirement	$31,669.20

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples	Association of American Associations, Wash., D.C.	Speech	Feb 2, 1999	$2,000
	XYZ Magazine	Article	Aug 13, 1999	$500
	NONE			

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Name Solomon Porfirio Ortiz

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	Block A	Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	Mega Corp Stock					X								X										X								P
DC	Simon & Schuster				Indefinite															Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
	1250 4th St SW Wash D.C.				X										X											X						
	Amtex Security, Inc. Corpus Christi, TX				X									X													X					
	Wright Patman Cong Federal Credit Union				X									X									X									
	Unimproved lots (3) in Robstown, TX			X																none	X											
JT	4601 Carmen Unit 2104 Corpus Christi, TX				X										X										X							
JT	1011 Ennis Joslin Unit 108 Corpus Christi, TX				X															none	X											

(Property vacant all of 1999)

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Solomon Porfirio Ortiz

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	P, S, E
	Van Kampen Funds Pace Fund A - IRA				X									X			X				X											
	Equitable Common Stock Alliance now known as AXA Financial, Inc.			X										X								X										
	Equitable non-qualified annunity						X													None	X											
	Equitable - IRA				X															None	X											
	PLM Equipmwnt Growth Fund Lease of construction equipment in California	II	X											X								X										
	Worldwide Wireless Systems		X																	None	X											P

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SCHEDULE IV — TRANSACTIONS

Name Solomon Porfirio Ortiz

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	NONE														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
JT	Mercantile Bank, Corpus Christi, TX	Line of credit to Amtex Security, Inc.			X							

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Chinese National Association of Industry and Commerce	Feb 14-21	Wash DC - Taiwan - Wash DC	Y	Y	N	N
	U.S. Global Strategy Conference Sponsored by the National Security Caucus Foundation	Oct 1-3	Wash DC - Boston VA - Wash DC	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
President	Amtex Security, Inc. - Corpus Christi, Texas
Board Member	Congressional Hispanic Caucus Institute
Board Member	Overcoming Obstacles
Board Member	National Association of Latino Elected Officials

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 4:10

(10)

HAND DELIVERED

MC (Office Use Only)

Douglas A. Ose (Full Name)

1508 Longworth HOB (Mailing Address)

Washington DC 20515

202-225-5716 Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 3	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Douglas A. Ose	5-15-00

3269

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Mercy Healthcare Sacramento (Lynda D. Ose)	Wages	—

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
NONE			

This page may be copied if more space is required.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples*	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts					X									X									X							
	IBM						X								X										X								
	General Electric						X								X										X								
	Bank of America						X								X										X								
	AT+T				X										X									X									
	Lucent Technologies				X	X									X								X										
	Intel					X									X								X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Douglas A. Ose

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
	Agilent Technologies				X																X											P
	Corning				X									X								X										P
	Venator			X																	X											
	Cypress Semiconductor			X																	X											
	Exodus Communications			X																	X											P
	State Street Bank				X									X								X										
	Time Warner			X										X								X										
	Hewlett Packard				X									X								X										
	Pepsi			X										X								X										S
	National Healthcare			X																	X											P
	Tricon Global		X																		X											
SP	Mercy Retirement			X																	X											
	Ose Properties No. 3							X						Partnership Distributions												X						
	Ose Properties No. 4								X							"				"									X			
	Ose Properties No. 5								X							"				"								X				
	Ose Properties No. 6										X					"				"												
	River Court West LP						X									"				"						X						
	Lowe Road LP							X								"				"							X					
	Ose LP									X						"				"									X			
	Mellow LP									X						"				"							X					

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Douglas A. Ose

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Brookline Racquet Club LP					X	X							Partnership Distributions												X						
	Natick Racquet Club LP					X	X									"				"						X						
	Fall River Racquet Club LP						X									"				"						X						
	Ose Properties, Inc.									X				Subch. S Corp. Distributions														X				
	Melrose, Inc.						X									"		"		"	Tax Returns still open on extension											
	MMSD, Inc.								X							"		"		"	X											
	Lockerrooms 2 LP							X						Partnership Distributions							X											
	H Sylvan LP						X									"				"	X											
	Spalding Court Inv. Co., Inc.					X								Subch. S Corp. Distributions							X											
	2250 Univ. Ave Soc'b.						X								X											X						

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SCHEDULE IV — TRANSACTIONS

Name Douglas A. Ose

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	Pepsi		X		11-19-99	X									
	Agilent Technologies	X			12-29-99	X									
	Corning	X			11-19-99	X									
	Exodus Communications	X			11-19-99	X									
	National Healthcare Corp	X			8-17-99	X									
	Airborne Freight	X			1-11-99	X									
	Airborne Freight		X		8-18-99	X									
	General Electric	X			12-29-99		X								
	Union Carbide		X		8-10-99	X									
	General Electric Div. Reinv.	X			Various	X									
	Bank of America " "	X			"	X									
	IBM " "	X			"	X									
	Hewlett Packard " "	X			"	?									
	State Street Bank " "	X			"	?									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability										
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wells Fargo Bank	Mortgage 2060 Wylie Way Sacramento 95825						X	X			

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
NONE							

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
NONE	

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 JUN 13 PM 4:34
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
INSIDE MAIL
(Office Use Only)

(4)

Major Robert Owens
(Full Name)

135 Eastern Parkway Apt. 3H (718) 773-3100
(Mailing Address) (Daytime Telephone)

Brooklyn, New York 11238

Filer Status	☒ Member of the U.S. House of Representatives — State: New York District: 11th	☐ Officer or Employee	Employing Office:
Report Type	☒ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☐	No ☒	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☒
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☒	No ☐	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☒	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes ☐	No ☒	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☒	No ☐
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☐	No ☒	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☒
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☐	No ☒	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☒
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☒

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Major R. Owens	June 9, 2000

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SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	Council For Opportunity In Education Washington, D.C.	Speech	Sept. 3, 1999	2,000

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Name Major R. Owens | Page 3 of 4

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute	August 16-21	Wash, D.C. - Berlin - Wash, D.C.	Y	Y	Y	N
	Benedict College	May 8-9	Washing D.C. - Columbia - New York	Y	Y	N	N
	Council of Opportunity In Education	September 11-12	New York - San Antonio - New York	Y	Y	N	N
	National Alliance of Black School Educators	November 11-13	Washington - Nashville - New York	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	Communovations Associates

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 15 PM 2:05

(51)
HAND DELIVERED
(Office Use Only)

Michael Garver Oxley
(Full Name)

2233 Rayburn H.O.B.
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone (202)225-2676

Filer Status: [X] Member of the U.S. House of Representatives — State Ohio District 4th; [ ] Officer or Employee — Employing Office

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.** — Yes [X] No [ ]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [ ] No [X]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [ ] No [X]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? — Yes [ ] No [X]

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? — Yes [ ] No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief		May 15, 2000

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Name	OXLEY	Page 2 of 10

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Weichert Realtors	Spouse Commissions	N/A

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
	Schwab Capital Markets	Speech	Nov. 5, 1999	$ 2,000

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ATTACHMENT
SCHEDULE III
ASSETS & UNEARNED INCOME

Merrill Lynch

CMA® LINK SERVICE

MICHAEL G OXLEY AND
PATRICIA A OXLEY JTWROS

YOUR FINANCIAL CONSULTANT:
HARRISON/ARRISON

(202) 659-7240

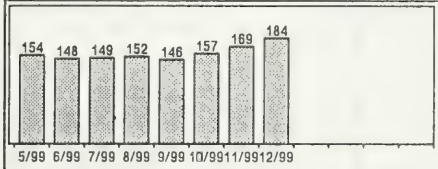
For Client Service Questions Call:
1-800-MER-LINK

Office Serving Your Account

Total Value as of December 31, 1999
$183,827.00

Asset Allocation Summary

Total Value Comparison (in $ thousands)



Activity Summary

	Dec 99	May 99 To Date
Beginning Value	168,573	158,168
Net Deps/Wthdrwls	0	-11,314
Div/Int Income	5,168	5,738
Chg in Market Value	10,086	31,235
Ending Value	183,827	183,827

Statement Information

Account No.	Account Name	Page
	MICHAEL G OXLEY AND	1 to 14
	MICHAEL G OXLEY AND	15 to 20
	FBO MICHAEL G OXLEY	21 to 32
	FBO PATRICIA OXLEY	33 to 44

Summary of Account(s)

Account Type	Total Value This Month	Total Value Last Month	Gains and Losses YTD Realized	Gains and Losses Unrealized
1 CMA	43,898	40,184	-261	7,695
2 CMA	2,860	2,845	25	-
3 Retirement	85,511	78,341	136	10,210
4 Retirement	51,558	47,203	77	8,752
Total	183,827	168,573	-23	26,657

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PLEASE SEE REVERSE SIDE

Page

Statement Period

Account No.

3286

Merrill Lynch

MFA Selects

MERRILL LYNCH CMA® ACCOUNT

TOTAL ACCOUNT VALUE AS OF 12/31/1999 $43,898.00

MICHAEL G OXLEY AND
PATRICIA A OXLEY JTWROS

YOUR FINANCIAL CONSULTANT:
HARRISON/ARRISON

(202) 659-7240

Your Merrill Lynch Office:

FOR CUSTOMER SERVICE QUESTIONS: 1-800-MER-LINK

Monthly Portfolio Summary

Asset	11/26/99 Value	%	12/31/99 Value	%
Cash/Money Funds	101	*	101	*
CD's/Equivalents				
Government Securities				
Corporate Bonds				
Municipal Bonds				
Equities				
Mutual Funds	40,083	100	43,797	100
Options				
Other				
*-Less than 1 %				
Long Market Value	40,184		43,898	
Short Market Value				
Estimated Accrued Interest				
Debit Balance				
Net Portfolio Value	40,184		43,898	

Income Summary

	This Statement	Year-to-Date
Money Fund Dividends	.43	85.75
Tax-Exempt CMA Funds		
Tax-Exempt Interest		
Reportable Interest		
Reportable Dividends	1,079.86	1,298.72
Income Not Reported		
Total	1,080.29	1,384.47

Items for Attention

Security	Message	Date
	No Items For Attention	

Purchasing Power 101 Investor Credit Line

NEWS

The 2000 Collective Wisdom Portfolios. Merrill Lynch's global research team has introduced the U.S. and International Collective Wisdom Portfolios, comprised of their top stock ideas for the year ahead. For more information and to get our 20 pg. report contact your Financial Consultant, log on to MLOL or call 1-800-Merrill ext. 4576.

Financial Market Indicators

	This Statement	Last Statement	Previous Year-End
Dow Jones Industrial Average	11497.12	10877.81	9181.43
Three-Month Treasury Bills	5.31%	5.29%	4.45%
Long-Term Treasury Bonds	6.47%	6.28%	5.09%

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Merrill Lynch

MFA Selects

MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date
Opening Balance Cash & Money Funds	101.56	
Net Credits & Debits	.43	101.99
Closing Balance Cash & Money Funds	101.99	

Credits	This Statement	Year-to-Date
Sales		8,830.98
Income	1,080.29	1,384.47
Funds Received		
Other		28,026.00
Total Credits	1,080.29	38,241.45

Debits	This Statement	Year-to-Date
Purchases		36,522.99
Withdrawals		
Other	1,079.86	1,616.47
Total Debits	1,079.86	38,139.46

Realized Capital Gain and Loss Summary*

	This Month	Year-to-Date
Short-Term	.00	(261.56)
Long-Term	.00	.00

*-Excludes transactions for which we have insufficient data.

The capital gains and losses shown above may not reflect all transactions which must be reported on your 1999 tax return. These reportable transactions will appear on your January statement.

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Merrill Lynch

MFA Selects

MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Current Portfolio

Quantity	Security Description	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
	Cash and Money Funds									
101	CMA MONEY FUND		1.00	101	1.00	101			5	5.26

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
217	ALLIANCE PREMIER GROWTH FD ADV CL			04/14/99	34.23	7,429	36.97	8,022	591		
	(.2600 FRACTIONAL SHARE)			N/A	N/A	N/A	36.97	9	N/A		
	Total Client Investment			$6,912							
	Investment Return			$1,110							
461	AMERN CENTY INC & GR FD			04/14/99	30.35	13,992	34.05	15,697	1,706	445	2.83
	(.1660 FRACTIONAL SHARE)			N/A	N/A	N/A	34.05	5	N/A		2.83
	Total Client Investment			$13,869							
	Investment Return			$1,827							

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Merrill Lynch

MFA Selects

MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
400	NATIONS MARSICO FOCUS EQUITY CL A			04/14/99	17.55	7,021	22.63	9,052	2,030		
	(.4120 FRACTIONAL SHARE)			N/A	N/A	N/A	22.63	9	N/A		
	Total Client Investment			$6,936							
	Investment Return			$2,115							
80	PUTNAM INTERNATIONAL GROWTH FUND CL A			10/13/99	23.54	1,883	29.68	2,374	491	27	1.14
	(.8460 FRACTIONAL SHARE)			N/A	N/A	N/A	29.68	25	N/A		1.14
	Total Client Investment			$1,829							
	Investment Return			$545							
87	ROBERTSON STEPH EMERGING GROWTH FD			04/14/99	33.00	2,871	60.66	5,277	2,406		
	(.7400 FRACTIONAL SHARE)			N/A	N/A	N/A	60.66	44	N/A		
	Total Client Investment			$2,598							
	Investment Return			$2,678							
139	VAN KAMPEN AMERICAN VALUE FD CL A			04/14/99	20.13	2,799	23.53	3,270	471		
	(.3940 FRACTIONAL SHARE)			N/A	N/A	N/A	23.53	9	N/A		
	Total Client Investment			$2,598							
	Investment Return			$671							
	Total Mutual Funds - Equity					35,997		43,797	7,695	472	1.08

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Total Mutual Funds					35,997		43,797	7,695	472	1.08
	Total of Long Portfolio					36,098*		43,898	7,695 *	478	1.09

DATE ACQUIRED: Date of your initial investment in this fund.
UNIT COST BASIS: Average cost basis for all shares owned
UNREALIZED GAIN or (LOSS): Total market value minus total cost basis

TOTAL CLIENT INVESTMENT: Cost of shares directly purchased (excluding shares purchased through reinvestment)
INVESTMENT RETURN: Value of reinvested shares plus capital appreciation(depreciation) of all shares purchased, including through reinvestment.

* - Excludes N/A items

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/03	Divd Reinv	4	ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $227.19 REINV PRICE $48.12000 QUANTITY BOT 4.7210 AS OF 11/30			
12/03	Journal Entry	1	ROBERTSON STEPH EMERGING GROWTH FD FULL SHARE ACCUM			
12/16	Divd Reinv	8	VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $199.41 REINV PRICE $22.27000 QUANTITY BOT 8.9540 AS OF 12/13			

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/16	Journal Entry	1	VAN KAMPEN AMERICAN VALUE FD CL A FULL SHARE ACCUM			
12/21	Divd Reinv	2	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $98.01 REINV PRICE $34.50000 QUANTITY BOT 2.8410 AS OF 12/15			
12/21	Journal Entry	1	ALLIANCE PREMIER GROWTH FD ADV CL FULL SHARE ACCUM			
12/21	Divd Reinv	11	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $381.89 REINV PRICE $34.50000 QUANTITY BOT 11.0690 AS OF 12/15			
12/21	Divd Reinv	1	AMERN CENTY INC & GR FD REINV AMOUNT $37.68 REINV PRICE $32.73000 QUANTITY BOT 1.1510 AS OF 12/17			
12/23	Journal Entry	1	PUTNAM INTERNATIONAL GROWTH FUND CL A FULL SHARE ACCUM			
12/23	Divd Reinv	1	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $46.33 REINV PRICE $27.09000 QUANTITY BOT 1.7100 AS OF 12/13			

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MERRILL LYNCH CMA® ACCOUNT

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MICHAEL G OXLEY AND

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/23	Journal Entry	1	PUTNAM INTERNATIONAL GROWTH FUND CL A FULL SHARE ACCUM			
			Net Total			
			Dividends and Interest			
12/02	* Lg Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD			44.79
12/02	* Sh Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD			227.19
12/14	* Lg Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A			3.27
12/14	* Sh Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A			199.41
12/20	* Lg Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL			381.89
12/20	* Sh Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL			98.01
12/20	* Dividend		AMERN CENTY INC & GR FD			37.68
12/22	* Dividend		PUTNAM INTERNATIONAL GROWTH FUND CL A			26.31
12/22	* Lg Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A			46.33
12/22	* Sh Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A			14.98
12/31	Cash Dividend		CMA MONEY FUND FROM 11-25 THRU 12-31			.43
			Net Total			1,080.29

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Other Activity			
12/02	Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		44.79	
12/02	Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		227.19	
12/03	Divd Reinv		ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $44.79 REINV PRICE $48.12000 QUANTITY BOT .9310 AS OF 11/30			
12/14	Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		3.27	
12/14	Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		199.41	
12/16	Divd Reinv		VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $3.27 REINV PRICE $22.27000 QUANTITY BOT .1470 AS OF 12/13			
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		361.89	
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		98.01	
12/20	Reinvestment		AMERN CENTY INC & GR FD		37.68	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		26.31	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		46.33	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		14.98	

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Other Activity			
12/23	Divd Reinv		PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $14.98 REINV PRICE $27.09000 QUANTITY BOT .5530 AS OF 12/13			
12/23	Divd Reinv		PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $26.31 REINV PRICE $27.09000 QUANTITY BOT .9710 AS OF 12/13			
			Net Total		1,079.86	

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MERRILL LYNCH CMA® ACCOUNT

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MICHAEL G OXLEY AND

Tax Information Summary

	This Statement	Year-to-Date
Accrued Interest Paid		
Tax-Exempt		
Reportable		
Accrued Interest Received		
Tax-Exempt		
Reportable		
Gross Proceeds		8,825.40

Although we provide complete year-to-date information for Reportable Accrued Interest Received, Accrued Interest Paid and Tax-Exempt Accrued Interest Received and Paid include only those months we produce your profit and loss statement.

Daily Activity Review

Date	Transaction	Quantity	Description	Price	Amount	Cash Balance	Share Balance
11/26	Opening Balance					.56CR	101
12/02	* Lg Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD		44.79CR		
12/02	Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		44.79		
12/02	* Sh Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD		227.19CR		
12/02	Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		227.19	.56CR	101

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MERRILL LYNCH CMA ACCOUNT

MICHAEL G OXLEY AND

Daily Activity Review

Date	Transaction	Quantity	Description	Price	Amount	Cash Balance	Share Balance
12/03	Divd Reinv	4	ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $227.19 REINV PRICE $48.12000 QUANTITY BOT 4.7210 AS OF 11/30				
12/03	Divd Reinv		ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $44.79 REINV PRICE $48.12000 QUANTITY BOT .9310 AS OF 11/30				
12/03	Journal Entry	1	ROBERTSON STEPH EMERGING GROWTH FD FULL SHARE ACCUM			.56CR	101
12/14	* Lg Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A		3.27CR		
12/14	Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		3.27		
12/14	* Sh Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A		199.41CR		
12/14	Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		199.41	.56CR	101
12/16	Divd Reinv	8	VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $199.41 REINV PRICE $22.27000 QUANTITY BOT 8.9540 AS OF 12/13				
12/16	Journal Entry	1	VAN KAMPEN AMERICAN VALUE FD CL A FULL SHARE ACCUM				

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Daily Activity Review

Date	Transaction	Quantity	Description	Price	Amount	Cash Balance	Share Balance
12/16	Divd Reinv		VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $3.27 REINV PRICE $22.27000 QUANTITY BOT .1470 AS OF 12/13			.56CR	101
12/20	* Lg Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL		381.89CR		
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		381.89		
12/20	* Sh Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL		98.01CR		
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		98.01		
12/20	* Dividend		AMERN CENTY INC & GR FD		37.68CR		
12/20	Reinvestment		AMERN CENTY INC & GR FD		37.68	.56CR	101
12/21	Divd Reinv	2	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $98.01 REINV PRICE $34.50000 QUANTITY BOT 2.8410 AS OF 12/15				
12/21	Journal Entry	1	ALLIANCE PREMIER GROWTH FD ADV CL FULL SHARE ACCUM				
12/21	Divd Reinv	11	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $381.89 REINV PRICE $34.50000 QUANTITY BOT 11.0690 AS OF 12/15				

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Daily Activity Review

Date	Transaction	Quantity	Description	Price	Amount	Cash Balance	Share Balance
12/21	Divd Reinv	1	AMERN CENTY INC & GR FD REINV AMOUNT $37.68 REINV PRICE $32.73000 QUANTITY BOT 1.1510 AS OF 12/17			.56CR	101
12/22	* Dividend		PUTNAM INTERNATIONAL GROWTH FUND CL A		26.31CR		
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		26.31		
12/22	* Lg Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A		46.33CR		
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		46.33		
12/22	* Sh Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A		14.98CR		
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		14.98	.56CR	101
12/23	Divd Reinv		PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $14.98 REINV PRICE $27.09000 QUANTITY BOT .5530 AS OF 12/13				
12/23	Journal Entry	1	PUTNAM INTERNATIONAL GROWTH FUND CL A FULL SHARE ACCUM				
12/23	Divd Reinv	1	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $46.33 REINV PRICE $27.09000 QUANTITY BOT 1.7100 AS OF 12/13				

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Daily Activity Review

Date	Transaction	Quantity	Description	Price	Amount	Cash Balance	Share Balance
12/23	Divd Reinv		PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $26.31 REINV PRICE $27.09000 QUANTITY BOT .9710 AS OF 12/13				
12/23	Journal Entry	1	PUTNAM INTERNATIONAL GROWTH FUND CL A FULL SHARE ACCUM			.56CR	101
12/31	Cash Dividend		CMA MONEY FUND FROM 11-25 THRU 12-31		.43CR		
12/31	Closing Balance				.99CR	.99CR	101

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6022 PLEASE SEE REVERSE SIDE **END OF STATEMENT**

Page CODE # 6060 (R) Statement Period Account No.

14 OF 44 11/27/99 TO 12/31/99

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MERRILL LYNCH CMA® ACCOUNT

TOTAL ACCOUNT VALUE AS OF 12/31/1999 $2,860.00

MICHAEL G OXLEY AND
PATRICIA A OXLEY JTWROS

YOUR FINANCIAL CONSULTANT:
HARRISON/ARRISON

(202) 659-7240

Your Merrill Lynch Office:

FOR CUSTOMER SERVICE QUESTIONS: 1-800-MER-LINK

Monthly Portfolio Summary

Asset	11/26/99 Value	%	12/31/99 Value	%
Cash/Money Funds	2,845	100	2,860	100
CD's/Equivalents				
Government Securities				
Corporate Bonds				
Municipal Bonds				
Equities				
Mutual Funds				
Options				
Other				
Long Market Value	2,845		2,860	
Short Market Value				
Estimated Accrued Interest				
Debit Balance				
Net Portfolio Value	2,845		2,860	

Income Summary

	This Statement	Year-to-Date
Money Fund Dividends	15.09	524.07
Tax-Exempt CMA Funds		
Tax-Exempt Interest		
Reportable Interest		
Reportable Dividends		
Income Not Reported		
Total	15.09	524.07

Items for Attention

Security	Message	Date
	No Items For Attention	

Purchasing Power 2,860 Investor Credit Line

NEWS

The 2000 Collective Wisdom Portfolios. Merrill Lynch's global research team has introduced the U.S. and International Collective Wisdom Portfolios, comprised of their top stock ideas for the year ahead. For more information and to get our 20 pg. report contact your Financial Consultant, log on to MLOL or call 1-800-Merrill ext. 4576.

Financial Market Indicators

	This Statement	Last Statement	Previous Year-End
Dow Jones Industrial Average	11497.12	10877.81	9181.43
Three-Month Treasury Bills	5.31%	5.29%	4.45%
Long-Term Treasury Bonds	6.47%	6.28%	5.09%

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Page	Statement Period	Account No
15 OF 44	11/27/99 TO 12/31/99	

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Merrill Lynch

MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date	Credits	This Statement	Year-to-Date	Debits	This Statement	Year-to-Date
Opening Balance								
Cash & Money Funds	2,845.02		Sales		8,031.41	Purchases		
			Income	15.09	524.07	Withdrawals		
			Funds Received			CMA Checks		10,632.35
			Other			Other		28,126.00
Net Credits & Debits	15.09	30,202.87DR						
Closing Balance								
Cash & Money Funds	2,860.11		Total Credits	15.09	8,555.48	Total Debits		38,758.35

Realized Capital Gain and Loss Summary*

	This Month	Year-to-Date
Short-Term	.00	25.89
Long-Term	.00	.00

*-Excludes transactions for which we have insufficient data.

The capital gains and losses shown above may not reflect all transactions which must be reported on your 1999 tax return. These reportable transactions will appear on your January statement.

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MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Current Portfolio

Quantity	Security Description	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
	Cash and Money Funds									
2,860	CMA MONEY FUND		1.00	2,860	1.00	2,860			150	5.26
	Total Cash/Money Funds			2,860		2,860			150	5.26
	Total of Long Portfolio			2,860		2,860			150	5.26

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Dividends and Interest			
12/31	Share Dividend	15	CMA MONEY FUND			.09
12/31	Cash Dividend		CMA MONEY FUND FROM 11-25 THRU 12-31			15.00
	Income Total		CMA MONEY FUND			15.09
			Net Total			

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Page 17 OF 44 Statement Period 11/27/99 TO 12/31/99 Account No.

Merrill Lynch

MERRILL LYNCH CMA® ACCOUNT

MICHAEL G OXLEY AND

Tax Information Summary

	This Statement	Year-to-Date
Accrued Interest Paid		
Tax-Exempt		
Reportable		
Accrued Interest Received		
Tax-Exempt		
Reportable		
Gross Proceeds		8,026.13

Although we provide complete year-to-date information for Reportable Accrued Interest Received, Accrued Interest Paid and Tax-Exempt Accrued Interest Received and Paid include only those months we produce your profit and loss statement.

Daily Activity Review

Date	Transaction	Quantity	Description	Price	Amount	Cash Balance	Share Balance
11/26	Opening Balance					1.02CR	2,844
11/29	Purchase	1	CMA MONEY FUND		1.00	.02CR	2,845
12/31	Share Dividend	15	CMA MONEY FUND				
12/31	Cash Dividend		CMA MONEY FUND FROM 11-25 THRU 12-31		.09CR		
12/31	Closing Balance				.11CR	.11CR	2,860

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MFA Selects

MERRILL LYNCH IRRA® ACCOUNT

TOTAL ACCOUNT VALUE AS OF 12/31/1999 $85,511.00

MLPF& S CUST FPO
MICHAEL G OXLEY IRRA
FBO MICHAEL G OXLEY

YOUR FINANCIAL CONSULTANT:
HARRISON/ARRISON

(202) 659-7240

Your Merrill Lynch Office:

FOR CUSTOMER SERVICE QUESTIONS: 1-800-MER-LINK

Monthly Portfolio Summary

Asset	11/26/99 Value	%	12/31/99 Value	%
Cash/Money Funds	344	*	345	*
CD's/Equivalents				
Government Securities				
Corporate Bonds				
Municipal Bonds				
Equities				
Mutual Funds	77,997	100	85,165	100
Options				
Other				
*-Less than 1 %				
Long Market Value	78,341		85,511	
Short Market Value				
Estimated Accrued Interest				
Debit Balance				
Net Portfolio Value	78,341		85,511	

Income Summary

	This Statement	Year-to-Date
Fund Dividends	1.77	644.62
Interest Income		
Dividend Income	2,294.99	2,520.97
Total	2,296.76	3,165.59

Items for Attention

Security	Message	Date
	No Items For Attention	

NEWS

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Financial Market Indicators

	This Statement	Last Statement	Previous Year-End
Dow Jones Industrial Average	11497.12	10877.81	9181.43
Three-Month Treasury Bills	5.31%	5.29%	4.45%
Long-Term Treasury Bonds	6.47%	6.28%	5.09%

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Page	Statement Period	Account No.
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Merrill Lynch

MFA Selects

MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date	Credits	This Statement	Year-to-Date	Debits	This Statement	Year-to-Date
Opening Balance								
Cash & Money Funds	344.51		Sales		22,961.95	Purchases		62,393.02
			Income	2,296.76	3,165.59	Withdrawals		
			Funds Received			Other	2,294.99	3,208.52
Net Credits & Debits	1.77	39,474.00DR	Other					
Closing Balance								
Cash & Money Funds	346.28		Total Credits	2,296.76	26,127.54	Total Debits	2,294.99	65,601.54

Realized Capital Gain and Loss Summary*

	This Month	Year-to-Date
Short-Term	.00	133.83
Long-Term	.00	.00

*-Excludes transactions for which we have insufficient data.

The capital gains and losses shown above may not reflect all transactions which must be reported on your 1999 tax return. These reportable transactions will appear on your January statement.

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Merrill Lynch

MFA Selects

MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Current Portfolio

Quantity	Security Description	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
	Cash and Money Funds									
345	RETIREMENT RESERVES CL I		1.00	345	1.00	345			18	5.46

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
424	ALLIANCE PREMIER GROWTH FD ADV CL			04/14/99	34.23	14,516	36.97	15,675	1,158		
	(.1570 FRACTIONAL SHARE)			N/A	N/A	N/A	36.97	5	N/A		
	Total Client Investment			$13,585							
	Investment Return			$2,089							
599	AMERN CENTY INC & GR FD			04/14/99	30.35	18,180	34.05	20,395	2,216	578	2.83
	(.9130 FRACTIONAL SHARE)			N/A	N/A	N/A	34.05	31	N/A		2.83
	Total Client Investment			$18,058							
	Investment Return			$2,337							

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Merrill Lynch

MFA Selects

MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
447	MASSACHUSETTS INVESTORS TRUST CLASS A			07/06/98	21.64	9,676	20.95	9,364	(313)	42	.45
	(.0240 FRACTIONAL SHARE)			N/A	N/A	N/A	20.95		N/A		.45
	Total Client Investment			$8,991							
	Investment Return			$373							
874	NATIONS MARSICO GRWTH AND INC FD			04/14/99	15.58	13,625	21.01	18,362	4,738		
	(.3710 FRACTIONAL SHARE)			N/A	N/A	N/A	21.01	7	N/A		
	Total Client Investment			$13,594							
	Investment Return			$4,768							
156	PUTNAM INTERNATIONAL GROWTH FUND CL A			10/13/99	23.58	3,680	29.68	4,630	949	52	1.14
	(.9390 FRACTIONAL SHARE)			N/A	N/A	N/A	29.68	27	N/A		1.14
	Total Client Investment			$3,517							
	Investment Return			$1,112							
168	ROBERTSON STEPH EMERGING GROWTH FD			04/14/99	33.03	5,549	60.66	10,190	4,640		
	(.8780 FRACTIONAL SHARE)			N/A	N/A	N/A	60.66	53	N/A		
	Total Client Investment			$5,068							
	Investment Return			$5,122							

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
272	VAN KAMPEN AMERICAN VALUE FD CL A			04/14/99	20.13	5,476	23.53	6,400	925		
	(.8120 FRACTIONAL SHARE)			N/A	N/A	N/A	23.53	19	N/A		
	Total Client Investment			$5,097							
	Investment Return			$1,302							
	Total Mutual Funds - Equity					70,705		85,165	14,313	675	.79
	Total Mutual Funds					70,705		85,165	14,313	675	.79
	Total of Long Portfolio					71,051*		85,511	14,313 *	694	.81

DATE ACQUIRED: Date of your initial investment in this fund.
UNIT COST BASIS: Average cost basis for all shares owned
UNREALIZED GAIN or (LOSS): Total market value minus total cost basis

TOTAL CLIENT INVESTMENT: Cost of shares directly purchased (excluding shares purchased through reinvestment)
INVESTMENT RETURN: Value of reinvested shares plus capital appreciation(depreciation) of all shares purchased, including through reinvestment.

* - Excludes N/A items

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/03	Divd Reinv	9	ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $437.28 REINV PRICE $48.12000 QUANTITY BOT 9.0870 AS OF 11/30			
12/03	Divd Reinv	1	ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $86.20 REINV PRICE $48.12000 QUANTITY BOT 1.7910 AS OF 11/30			
12/16	Divd Reinv	17	VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $390.28 REINV PRICE $22.27000 QUANTITY BOT 17.5250 AS OF 12/13			
12/16	Divd Reinv	10	MASSACHUSETTS INVESTORS TRUST CLASS A REINV AMOUNT $208.32 REINV PRICE $20.16000 QUANTITY BOT 10.3330 AS OF 12/10			
12/16	Journal Entry	1	MASSACHUSETTS INVESTORS TRUST CLASS A FULL SHARE ACCUM			
12/21	Divd Reinv	5	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $191.35 REINV PRICE $34.50000 QUANTITY BOT 5.5460 AS OF 12/15			

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/21	Divd Reinv	21	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $745.57 REINV PRICE $34.50000 QUANTITY BOT 21.6110 AS OF 12/15			
12/21	Journal Entry	1	ALLIANCE PREMIER GROWTH FD ADV CL FULL SHARE ACCUM			
12/21	Divd Reinv	1	AMERN CENTY INC & GR FD REINV AMOUNT $49.01 REINV PRICE $32.73000 QUANTITY BOT 1.4970 AS OF 12/17			
12/23	Divd Reinv	1	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $29.08 REINV PRICE $27.09000 QUANTITY BOT 1.0730 AS OF 12/13			
12/23	Divd Reinv	3	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $89.94 REINV PRICE $27.09000 QUANTITY BOT 3.3200 AS OF 12/13			
12/23	Journal Entry	1	PUTNAM INTERNATIONAL GROWTH FUND CL A FULL SHARE ACCUM			

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Monthly Activity

Date		Transaction	Quantity	Description	Price	Debit	Credit
				Security Transactions			
12/23		Divd Reinv	1	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $51.07 REINV PRICE $27.09000 QUANTITY BOT 1.8850 AS OF 12/13			
				Net Total			
				Dividends and Interest			
12/02	*	Lg Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD			86.20
12/02	*	Sh Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD			437.28
12/13	*	Dividend		MASSACHUSETTS INVESTORS TRUST CLASS A			10.49
12/13	*	Lg Tm Cap Gain		MASSACHUSETTS INVESTORS TRUST CLASS A			208.32
12/14	*	Lg Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A			6.40
12/14	*	Sh Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A			390.28
12/20	*	Lg Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL			745.57
12/20	*	Sh Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL			191.35
12/20	*	Dividend		AMERN CENTY INC & GR FD			49.01
12/22	*	Dividend		PUTNAM INTERNATIONAL GROWTH FUND CL A			51.07

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Monthly Activity

Date		Transaction	Quantity	Description	Price	Debit	Credit
				Dividends and Interest			
12/22	*	Lg Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A			89.94
12/22	*	Sh Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A			29.08
		Income Total		RETIREMENT RESERVES CL I			1.77
				Net Total			2,296.76
				Other Activity			
12/02		Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		86.20	
12/02		Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		437.28	
12/13		Reinvestment		MASSACHUSETTS INVESTORS TRUST CLASS A		10.49	
12/13		Reinvestment		MASSACHUSETTS INVESTORS TRUST CLASS A		208.32	
12/14		Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		6.40	
12/14		Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		390.28	
12/16		Divd Reinv		VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $6.40 REINV PRICE $22.27000 QUANTITY BOT .2870 AS OF 12/13 -			

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Other Activity			
12/16	Divd Reinv		MASSACHUSETTS INVESTORS TRUST CLASS A REINV AMOUNT $10.49 REINV PRICE $20.16000 QUANTITY BOT .5200 AS OF 12/10			
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		745.57	
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		191.35	
12/20	Reinvestment		AMERN CENTY INC & GR FD		49.01	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		51.07	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		89.94	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		29.08	
			Net Total		2,294.99	

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MERRILL LYNCH IRRA® ACCOUNT

FBO MICHAEL G OXLEY

Retirement Account Money Funds Summary

Description	Fund Balances Opening	Fund Balances Closing	Dividends This Statement	Dividends Year-to-Date
Retirement Reserves CL I	$344.12	$345.89	$1.77	$644.62

Retirement Account Plan Summary

Account Type: IRA ROLLOVER Plan Number:
Year-End Plan Value as of December 31, 1999 $85,511.00
Contributions after December 30, 1998 for 1998 $.00

Social Security Number
Tax Identification Number 00-0000000
Date of Birth

	Tax Year 1999	Tax Year 1998
Contributions:		
Rollover Deposits	$.00	$65,662.24

In calculating mandatory distributions, or for the purpose of completing IRS Form 8606, you must use the value of your account as of 12/31/99. This value should include your Priced Portfolio total and the value of certain limited partnerships and other direct investments as well as any securities that we are unable to price - marked "Unavailable". The "Year-End Plan Value" shown consists of your Priced Portfolio total plus the estimated value of limited partnerships or other direct investments reported on your year-end statement.

For IRA, IRRA and SEP/IRA accounts, the Year-End Plan Value represents the valuation we must furnish to you and the Internal Revenue Service as part of the IRS Form 5498 reporting requirements.

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MERRILL LYNCH SEP ACCOUNT

TOTAL ACCOUNT VALUE AS OF 12/31/1999 $51,558.00

MLPF& S CUST FPO
PATRICIA A OXLEY SEP
FBO PATRICIA OXLEY

YOUR FINANCIAL CONSULTANT:
HARRISON/ARRISON

(202) 659-7240

Your Merrill Lynch Office:

FOR CUSTOMER SERVICE QUESTIONS: 1-800-MER-LINK

Monthly Portfolio Summary

Asset	11/26/99 Value	%	12/31/99 Value	%
Cash/Money Funds	227	*	228	*
CD's/Equivalents				
Government Securities				
Corporate Bonds				
Municipal Bonds				
Equities				
Mutual Funds	46,976	100	51,329	100
Options				
Other				
*-Less than 1 %				
Long Market Value	47,203		51,558	
Short Market Value				
Estimated Accrued Interest				
Debit Balance				
Net Portfolio Value	47,203		51,558	

Income Summary

	This Statement	Year-to-Date
Fund Dividends	1.10	398.82
Interest Income		
Dividend Income	1,779.94	1,878.02
Total	1,781.04	2,276.84

Items for Attention

Security	Message	Date
	No Items For Attention	

NEWS

The 2000 Collective Wisdom Portfolios. Merrill Lynch's global research team has introduced the U.S. and International Collective Wisdom Portfolios, comprised of their top stock ideas for the year ahead. For more information and to get our 20 pg. report contact your Financial Consultant, log on to MLOL or call 1-800-Merrill ext. 4576.

Financial Market Indicators

	This Statement	Last Statement	Previous Year-End
Dow Jones Industrial Average	11497.12	10877.81	9181.43
Three-Month Treasury Bills	5.31%	5.29%	4.45%
Long-Term Treasury Bonds	6.47%	6.28%	5.09%

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Page	Statement Period	Account No.
33 OF 44	11/27/99 TO 12/31/99	

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Cash Flow Summary

Activity Summary	This Statement	Year-to-Date	Credits	This Statement	Year-to-Date	Debits	This Statement	Year-to-Date
Opening Balance Cash & Money Funds	227.74		Sales		10,963.63	Purchases		42,712.96
			Income	1,781.04	2,276.84	Withdrawals		
			Funds Received		6,405.00	Other	1,779.94	2,260.07
Net Credits & Debits	1.10	25,327.56DR	Other					
Closing Balance Cash & Money Funds	228.84		Total Credits	1,781.04	19,645.47	Total Debits	1,779.94	44,973.03

Realized Capital Gain and Loss Summary*

	This Month	Year-to-Date
Short-Term	.00	77.02
Long-Term	.00	.00

*-Excludes transactions for which we have insufficient data.

The capital gains and losses shown above may not reflect all transactions which must be reported on your 1999 tax return. These reportable transactions will appear on your January statement.

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Current Portfolio

Quantity	Security Description	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield %
	Cash and Money Funds									
228	RETIREMENT RESERVES CL I		1.00	228	1.00	228			12	5.46

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
244	ALLIANCE PREMIER GROWTH FD ADV CL			04/14/99	34.07	8,313	36.97	9,020	707		
	(.7510 FRACTIONAL SHARE)			N/A	N/A	N/A	36.97	27	N/A		
	Total Client Investment			$7,763							
	Investment Return			$1,257							
538	AMERN CENTY INC & GR FD			04/14/99	30.41	16,363	34.05	18,318	1,957	519	2.83
	(.3760 FRACTIONAL SHARE)			N/A	N/A	N/A	34.05	12	N/A		2.83
	Total Client Investment			$16,210							
	Investment Return			$2,108							
134	JANUS TWENTY FUND			04/14/99	66.91	8,967	83.43	11,179	2,212	25	.22

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Mutual Funds and Defined Asset Funds										
Mutual Funds - Equity											
	(.2860 FRACTIONAL SHARE)			N/A	N/A	N/A	83.43	23	N/A		.22
	Total Client Investment			$8,344							
	Investment Return			$2,835							
93	PUTNAM INTERNATIONAL GROWTH FUND CL A			10/13/99	23.56	2,191	29.68	2,760	568	31	1.14
	(.8630 FRACTIONAL SHARE)			N/A	N/A	N/A	29.68	25	N/A		1.14
	Total Client Investment			$2,110							
	Investment Return			$649							
101	ROBERTSON STEPH EMERGING GROWTH FD			04/14/99	32.96	3,329	60.66	6,126	2,797		
	(.6810 FRACTIONAL SHARE)			N/A	N/A	N/A	60.66	41	N/A		
	Total Client Investment			$3,008							
	Investment Return			$3,117							
161	VAN KAMPEN AMERICAN VALUE FD CL A			04/14/99	20.35	3,276	23.53	3,788	511		
	(.1510 FRACTIONAL SHARE)			N/A	N/A	N/A	23.53	3	N/A		
	Total Client Investment			$3,031							
	Investment Return			$756							
	Total Mutual Funds - Equity					42,442		51,329	8,752	577	1.12

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Current Portfolio

Quantity	Security Description	Symbol	Sector	Date Acquired	Unit Cost Basis	Total Cost Basis	Estimated Market Price[1]	Estimated Market Value	Unrealized Gain or (Loss)	Estimated Annual Income	Current Yield %
	Total Mutual Funds					42,442		51,329	8,752	577	1.12

DATE ACQUIRED: Date of your initial investment in this fund.
UNIT COST BASIS: Average cost basis for all shares owned
UNREALIZED GAIN or (LOSS): Total market value minus total cost basis

TOTAL CLIENT INVESTMENT: Cost of shares directly purchased (excluding shares purchased through reinvestment)
INVESTMENT RETURN: Value of reinvested shares plus capital appreciation(depreciation) of all shares purchased, including through reinvestment

Total of Long Portfolio	42,671*	51,558	8,752 *	589	1.14

* - Excludes N/A items

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/03	Divd Reinv	5	ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $263.28 REINV PRICE $48.12000 QUANTITY BOT 5.4710 AS OF 11/30			
12/03	Divd Reinv	1	ROBERTSON STEPH EMERGING GROWTH FD REINV AMOUNT $51.90 REINV PRICE $48.12000 QUANTITY BOT 1.0790 AS OF 11/30			

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/14	Divd Reinv	6	JANUS TWENTY FUND REINV AMOUNT $520.03 REINV PRICE $79.80000 QUANTITY BOT 6.5170 AS OF 12/10			
12/14	Journal Entry	1	JANUS TWENTY FUND FULL SHARE ACCUM			
12/16	Divd Reinv	10	VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $230.54 REINV PRICE $22.27000 QUANTITY BOT 10.3520 AS OF 12/13			
12/16	Journal Entry	1	VAN KAMPEN AMERICAN VALUE FD CL A FULL SHARE ACCUM			
12/21	Divd Reinv	3	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $110.42 REINV PRICE $34.50000 QUANTITY BOT 3.2010 AS OF 12/15			
12/21	Divd Reinv	12	ALLIANCE PREMIER GROWTH FD ADV CL REINV AMOUNT $430.21 REINV PRICE $34.50000 QUANTITY BOT 12.4700 AS OF 12/15			
12/21	Divd Reinv	1	AMERN CENTY INC & GR FD REINV AMOUNT $43.90 REINV PRICE $32.73000 QUANTITY BOT 1.3440 AS OF 12/17			

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Security Transactions			
12/23	Divd Reinv	1	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $53.79 REINV PRICE $27.09000 QUANTITY BOT 1.9860 AS OF 12/13			
12/23	Journal Entry	1	PUTNAM INTERNATIONAL GROWTH FUND CL A FULL SHARE ACCUM			
12/23	Divd Reinv	1	PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $30.55 REINV PRICE $27.09000 QUANTITY BOT 1.1280 AS OF 12/13			
			Net Total			
			Dividends and Interest			
12/02	* Lg Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD			51.90
12/02	* Sh Tm Cap Gain		ROBERTSON STEPH EMERGING GROWTH FD			263.28
12/13	* Dividend		JANUS TWENTY FUND			24.07
12/13	* Lg Tm Cap Gain		JANUS TWENTY FUND			520.03
12/14	* Lg Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A			3.78
12/14	* Sh Tm Cap Gain		VAN KAMPEN AMERICAN VALUE FD CL A			230.54

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Monthly Activity

Date		Transaction	Quantity	Description	Price	Debit	Credit
				Dividends and Interest			
12/20	*	Lg Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL			430.21
12/20	*	Sh Tm Cap Gain		ALLIANCE PREMIER GROWTH FD ADV CL			110.42
12/20	*	Dividend		AMERN CENTY INC & GR FD			43.98
12/22	*	Dividend		PUTNAM INTERNATIONAL GROWTH FUND CL A			30.55
12/22	*	Lg Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A			53.79
12/22	*	Sh Tm Cap Gain		PUTNAM INTERNATIONAL GROWTH FUND CL A			17.39
		Income Total		RETIREMENT RESERVES CL I			1.10
				Net Total			1,781.04
				Other Activity			
12/02		Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		51.90	
12/02		Reinvestment		ROBERTSON STEPH EMERGING GROWTH FD		263.28	
12/13		Reinvestment		JANUS TWENTY FUND		24.07	
12/13		Reinvestment		JANUS TWENTY FUND		520.03	
12/14		Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		3.78	
12/14		Reinvestment		VAN KAMPEN AMERICAN VALUE FD CL A		230.54	

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Monthly Activity

Date	Transaction	Quantity	Description	Price	Debit	Credit
			Other Activity			
12/14	Divd Reinv		JANUS TWENTY FUND REINV AMOUNT $24.07 REINV PRICE $79.80000 QUANTITY BOT .3020 AS OF 12/10			
12/16	Divd Reinv		VAN KAMPEN AMERICAN VALUE FD CL A REINV AMOUNT $3.78 REINV PRICE $22.27000 QUANTITY BOT .1700 AS OF 12/13			
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		430.21	
12/20	Reinvestment		ALLIANCE PREMIER GROWTH FD ADV CL		110.42	
12/20	Reinvestment		AMERN CENTY INC & GR FD		43.98	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		30.55	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		53.79	
12/22	Reinvestment		PUTNAM INTERNATIONAL GROWTH FUND CL A		17.39	
12/23	Divd Reinv		PUTNAM INTERNATIONAL GROWTH FUND CL A REINV AMOUNT $17.39 REINV PRICE $27.09000 QUANTITY BOT .6420 AS OF 12/13			
			Net Total		1,779.94	

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FBO PATRICIA OXLEY

MERRILL LYNCH SEP ACCOUNT

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

SEP Retirement Account Money Funds Summary

Description	Fund Balances Opening	Fund Balances Closing	Dividends This Statement	Dividends Year-to-Date
Retirement Reserves CL I	$227.72	$228.82	$1.10	$398.82

SEP Retirement Account Plan Summary

Account Type: SEP PLAN Plan Number:

Year-End Plan Value as of December 31, 1999	$51,558.00
Contributions after 12/30/98 for 1998	$.00
Employer Contributions after 12/30/98 for 1998	$6,405.00

Social Security Number
Tax Identification Number 00-0000000
Date of Birth

Contributions:	Tax Year 1999	Tax Year 1998
Employer Contributions	$.00	$6,405.00

In calculating mandatory distributions, or for the purpose of completing IRS Form 8606, you must use the value of your account as of 12/31/99. This value should include your Priced Portfolio total and the value of certain limited partnerships and other direct investments as well as any securities that we are unable to price - marked "Unavailable". The "Year-End Plan Value" shown consists of your Priced Portfolio total plus the estimated value of limited partnerships or other direct investments reported on your year-end statement.

For IRA, IRRA and SEP/IRA accounts, the Year-End Plan Value represents the valuation we must furnish to you and the Internal Revenue Service as part of the IRS Form 5498 reporting requirements.

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MERRILL LYNCH SEP ACCOUNT

FBO PATRICIA OXLEY

Agreement Regarding Your Securities Account and Other Important Information
You, the Client, and we, Merrill Lynch, Pierce, Fenner & Smith Inc., agree as follows.
(1) We will direct your order for a multi-listed security or option to the market place we consider to be the primary market for that security, unless you give us specific instructions to direct the order elsewhere.
(2) We will hold bonds and preferred stocks in bulk segregation (except for those held in custodian accounts). In the event of a call for less than an entire issue or series of those securities, the securities to be called will be automatically selected on a random basis from those held in bulk. The probability that your holdings will be selected is proportional to the amount of your holdings relative to those of other customers.
(3) If you have any obligations to us we can, subject to applicable rules and regulations of regulatory bodies, without notifying you, take any of the following actions with any or all securities in your account, including securities you may acquire or deposit to secure your account

- We can pledge, repledge, hypothecate, or rehypothecate the securities. They may be commingled with securities carried for the accounts of other customers.
- We can lend the securities.
- We can deliver the securities on contracts for other customers even if we do not have in our possession and control a like amount of similar securities for delivery.

We can take any of these actions until you have discharged all your obligations to us. The amount involved in these actions may be more or less than the amount you owe us.
(4) We are not responsible for the loss or destruction of securities that are placed in the custody of a foreign bank or broker or other custodian, and are lost or destroyed as a result of war, civil commotion, enemy action, government acts or any other causes beyond the control of the depository or us.
(5) This statement of account shall be deemed conclusive if not objected to within ten (10) days.
(6) We can transfer your account to anyone by assignment, merger, consolidation or otherwise, unless you give us written notice to the contrary at the time. This agreement will inure to the benefit of anyone to whom we transfer the accounts. Nothing contained in this paragraph shall affect your right to transfer your account under NYSE Rule 412.

Insurance
We are a member of the Securities Investor Protection Corporation (SIPC). The securities held in your account are covered by SIPC protection and excess-SIPC protection obtained by Merrill Lynch. For details, refer to the Program Description for your account, if applicable, or speak with your Financial Consultant. We are not a bank, and the securities offered by us, unless otherwise indicated, are not backed or guaranteed by any bank nor are they insured by the FDIC.

Other Important Information
(1) Depository Institutions participating in the ISA program and Merrill Lynch Bank USA in the CMA 2.0 program pay us a fee up to 2% per annum of the average daily depository account balances in each program respectively.
(2) You will have the right to vote full shares, and we will solicit instructions concerning the voting of full shares held in your account. If such instructions are not received by us on a timely basis, the voting shares in your account will be governed by the rules and policies of the New York Stock Exchange and the Securities and Exchange Commission then in effect.

Merrill Lynch, Pierce, Fenner & Smith Inc.
World Financial Center
North Tower
New York, N.Y. 10281-1332
Member, Securities Investor Protection Corporation (SIPC)

Other Important Information (Continued)
(3) This statement serves as a confirmation of purchases that result from automatic reinvestment transactions, as well as your AIPS transactions, during the statement period.
(4) Insurance policy information is based on data from the insurer that issued the policy. Merrill Lynch is not responsible for the calculation of policy values. Policies are generally not held in your Merrill Lynch account. If Merrill Lynch as custodian or trustee holds a policy that is a security, SIPC protection and excess SIPC protection applies.
(5) As an option customer, please advise your Financial Consultant promptly of any material change in your investment objectives or financial condition. Individual options commission charges have been included in your confirmation; however, a summary of this information will be made available to you upon request.
(6) Our financial statement is available for your personal inspection at our office, or a copy of it will be mailed upon your written request.

Special Note: If your records differ from this information, please notify your Financial Consultant in writing with a copy of the statement noting the discrepancy and, if appropriate, any necessary adjustments will be made.

WCMA Loan Account Activity
Reports important information from Merrill Lynch Business Financial Services Inc. (MLBFS,Inc.) through which the WCMA Line of Credit is made available. Includes information on your Line of Credit, Loan Balance, Loan Subject to Interest, and Loan Interest Charged. Interest charges accrue daily during the statement period with each day being deemed to constitute 1/360 of a year. Refer to the WCMA Agreement and documents required by MLBFS for details.

Managed Trust Units
Information for RCMA for Business Retirement Plan clients on units of the Merrill Lynch GIC Managed Trust is reported from information supplied by the Merrill Lynch Trust Company or its agent. Neither the Trust nor its units are held in your Merrill Lynch, Pierce, Fenner & Smith Inc. account and therefore, are not subject to SIPC protection. An annual report will be furnished separately.

Symbols and Abbreviations

‡	Interest reported to IRS by Merrill Lynch as required by law.
■	Gross Proceeds reported to the IRS by Merrill Lynch as required by law.
*	Dividends reported to the IRS by Merrill Lynch as required by law.
**	Merrill Lynch maintains a fundamental opinion on this company.
.	Transactions reported to IRS.
//	Transaction you requested required same-day payment - MLPF&S retained last day's dividend to offset cost of advancing payment on your behalf.
Λ	This transaction was effected through a specialist which is our affiliate. In connection with its market making activity, such specialist may have a long or short position in this stock or in options on this stock and may be on the other side of public orders executed on the exchange. Such specialists may have profited or lost in connection with this transaction
N/A	Value and/or cost data not available.
N/C	Not calculated
N/N	Non-negotiable securities.
N/N N/O	Non-negotiable securities held registered in your name.
N/O	Held registered in your name.
NOCC	Options Clearing Corporation.
N/O CUST	Non-negotiable Custodian Registration.
NPC	Interests in assets not registered in the name of nor held by us or our nominees and held by you or registered in your name with the issuer or its agent. Merrill Lynch, Pierce, Fenner & Smith Inc. does not control or act as custodian for these investments.
RD	Bonds are changeable from coupon to registered and vice versa without charge
RG	Bonds registered for both principal and interest.

3327

Name OXLEY

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X										X								P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	Ohio Bank SEP (Keough)					X									X										X								
	Wright Patman FCU				X												X								X								
SP	Nations Bank VA					X											X										X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name OXLEY

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	** SEE ATTACHED																															

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SCHEDULE IV — TRANSACTIONS

Name OXLEY

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	Phoenix International		X		10/12/99	X									
JT	Mass Investers Trust		X		4/14/99	X									

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Name OXLEY

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	NONE											

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
CSX Corporation	Sept. 4 - Sept. 7	Wash.,D.C.-White Sulphur Springs, W.VA-Wash. D.C.	Y	Y	Y	N
Transatlantic Policy Network	Aug. 22 - Aug. 28	London-Edinburgh-London -Washington, D.C.	Y	Y	Y	N
Ripon Educational Fund	Aug. 14 - Aug. 21	Washington, D.C.- Stockholm-London	Y	Y	Y	N
Invest to Compete Alliance	July 2 - July 5	Washington, D.C.- Chatham, Mass - Wash.DC	Y	Y	Y	N
Cong. Economic Leadership Institute	March 26- April 1	Washington, DC-Florence- Rome-Washington, D.C.	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
	NONE

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement
	NONE	

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Use additional sheets if more space is required.

00 MAY 15 PM 5:54

MC HAND DELIVERED (4)
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UNITED STATES HOUSE OF REPRESENTATIVES

Form A
For use by Members, officers, and employees

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Ronald C. Packard
(Full Name)

2372 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202 225 3906

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 48	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ron Packard	5-15-00

3334

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude**: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None".	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, *Examples* JT. SP Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT Coin Collection	$1,001 - $15,000	Capital Gains	None	NA
Investment Diamonds	$15,001 - $50,000	Capital Gains	None	NA
SP Charles Schwab Self Directed IRA (Spouse). All invested in Appel Orthodontics Company went bankrupt and value is less than $200	None	Dividends	None	NA
Charles Schwab Self Directed IRA (Member). All invested in Appel Orthodontics. Company went Bankrupt Value is less than $200	None	Dividends	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Appel Orthodontics Stock not in IRA. Company went bankrupt. Value is less than $200.	None	Capital Gains	None	NA

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce Mega Corporation	Mar.2 Aug.6-13	Wash., D.C.-Chicago-Wash., D.C. Wash., D.C.-Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
American Association of Airport Executives 1999 Aviation Issues Conference	01/07/99-01/12/99	Washington-Kona- Washington	Y	Y	Y	3
Utah Families Golf Tournament, UT. Lodging and Food Only	08/22/99-0824/99	traveled on our own	Y	Y	Y	none
Danny Thompson Memorial Golf Tournament, Sun Valley, ID. Lodging and Food Only	08/25/99-08/28/99	traveled on our own	Y	Y	Y	none

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
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Frank J. Pallone Jr.
(Full Name)

1187 Ocean Ave
Long Branch, NJ 07740
(Mailing Address)

Daytime Telephone 202-225-4671

Filer Status	[X] Member of the U S House of Representatives	State NJ District 6th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Frank J. Pallone Jr.	5/15/00

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Name FRANK J PALLONE JR | Page 2 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (Dividends; Rent; Interest; Capital Gains; Excepted Trust; Qualified Blind Trust; Other Type of Income (Specify: For Example, Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	Examples: SP Mega Corp Stock	E	Dividends X		P
	Simon & Schuster	Indefinite	Royalties	IV, IX	
	1st Bank of Paducah, KY accounts	F	Interest X	VI	
	Congressional FCU Accounts	B	Interest X	I	
	First Union Bank Long Branch, NJ Accounts	B	Interest X	I	
SP	General Electric Co Exec Pension		Pension	VI	
SP	First Union Bank Washington, DC Accounts	B	Interest X	II	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name FRANK J PALLONE JR

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
JT	First Union Securities Charlotte NC																															
	Evergreen Reserve MM Fund			X										X								X										
	America Online			X										X							X											P
	Cisco Systems			X										X							X											P
	Lucent Technologies			X										X								X										P
	VS Treas Cube			X												X						X										
	Eaton Vance Mun Tr				X									X										X								P
	MFS Ser Tr IV				X									X			X								X							PS
	MFS Total Return Fund				X									X									X									PS
DC	First Union Securities Glen Allen VA		X											X																		
	Evergreen CRT Money			X										X								X										
	Disney Walt Co.													X								X										P
	General Electric Co				X									X									X									P
	Intel Corp				X									X								X										P
	MFS Research Cl A					X								X			X							X								
	MFS Emerg Growth Cl B				X									X			X						X									P
	Bristol Myers Squibb			X										X									X									P
	Clorox Company			X										X									X									P
	Microsoft				X									X							X											
	Vertex Pharmaceuticals			X										X							X											P

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name FRANK J PALLONE JR

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	FIRST UNION SECURITIES GLEN ALLEN VA																															
	SEP/IRA Accounts						X							X		X	X						NA		IRA							
SP	FIRST UNION SECURITIES GLEN ALLEN VA																															
	Roth IRA			X										X		X	X						NA		IRA							
	FIRST UNION SECURITIES GLEN ALLEN VA																															
	Roth IRA			X										X		X	X						NA		IRA							

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SCHEDULE IV — TRANSACTIONS

Name FRANK J. PALLONE JR

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
JT	America Online	X			5-17-99	X									
JT	Cisco Systems	X			1-26-99	X									
JT	Lucent Technologies	X			5-17-99	X									
JT	Eaton Vance Mun. TR	X			Various	X									
JT	MFS Sec TR IV	X			Various	X									
JT	MFS Total Return Fund	X	X		Various		X								
DC	Disney Walt Co	X			Various	X									
DC	General Electric Co	X			Various	X									
DC	Intel Corp.	X			Various	X									
DC	MFS Research Cl A	X			Various	X									
DC	MFS Emerg Growth Cl B	X			Various	X									
DC	Bristol Meyers Squibb	X			Various	X									
DC	Clorox Company	X			Various	X									
DC	Vertex Pharmaceuticals	X			Various	X									

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Honorary Member of Board	Rainbow Foundation
Honorary Member of Board	Rannney School Tinton Falls, N.J.
Member of Board	Zimmerli Museum Rutgers University

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
[illegible] RESOURCE CENTER
00 MAY 11 PM 12:50
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
(6)
HC HAND DELIVERED
(Office Use Only)

William James Pascrell Jr
(Full Name)

441 Ninth Avenue
(Mailing Address)

973-523-5152
Daytime Telephone

Paterson New Jersey 07514

Filer Status	[X] Member of the U.S House of Representatives	State New Jersey District 8	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION--Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William J Pascrell Jr	05/11/2000

3344

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	US House of Representatives (H)	Salary	136,700
	State of New Jersey (H)	Pension	43,540
	Your Staff Inc (W)	Salary	1,861
	HR Logic (W)	Salary	21,203

For payments to charity in lieu of honoraria, use Schedule II.

Name William James Paxsieff Jr / | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year

	BLOCK A Asset and/or Income Source		BLOCK B Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock					X							X										X								P
			Simon & Schuster		Indefinite																Royalties								X				
			1st Bank of Paducah, KY accounts						X								X									X							
JT	State of New Jersey - Pension								X																								
JT	Lenape Central School				X												X																
JT	County of Essex					X											X																
JT	City of Perth Amboy				X												X																
JT	Advest				X										X		X																
JT	Evergreen Money Trust				X												X																

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William James Pascrelli, Jr ✓

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Ryan Beck				X											X																
JT	First Union National				X											X																
JT	Chase Manhattan			X												X																
JT	Republic National Bank						X									X																
JT	US Series E Bonds					X										X																
JT	US Series EE Bonds			X												X																
JT	Magellan Mutual Fund (401K)			X												X																
JT	Magellan Mutual Fund (IRA)						X									X																
JT	First Union (IRA)			X												X																
JT	Putnam Tax Free (401K)				X											X																
JT	Franklin Variable Annuity					X										X																
JT	Hudson United Bank (IRA)				X											X																
JT	Valic (Deferred Compensation)						X									X																
JT	Thrift Savings Plan				X											X																
JT	Texas American Life Ins (Annuity)						X									X																

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SCHEDULE IV — TRANSACTIONS

Name William James Pascrell Jr

Page 5 of 6

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction										
			PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP, DC, JT	Asset															
SP	*Example:*	Mega Corporation Common Stock	X			10–12–99		X								
JT	100 Shares IBM		X			10/25/99	X									

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Fire Department Instructors Conf.	March 18-19	Wash. DC - Indianapolis - Wash DC	Y	Y	N	N
	International Fire Chiefs Assn	Aug 30-31	Wash DC - Kansas City - Wash DC	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 16 PM 1:05
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
WASH, DC
(6)
✓ HAND DELIVERED
MC
(Office Use Only)

William James Pascrell Jr
(Full Name)

441 Ninth Avenue
(Mailing Address)

973-523-5152
Daytime Telephone

Paterson New Jersey 07514

Filer Status	[X] Member of the U.S. House of Representatives	State: New Jersey District: 8	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	William J Pascrell Jr	05/15/00

3350

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	US House of Representatives (H)	Salary	136,700
	State of New Jersey (H)	Pension	43,540
	Your Staff Inc (W)	Salary	1,861
	HR Logic (W)	Salary	21,203

For payments to charity in lieu of honoraria, use Schedule II.

Name William James Paxsell Jr | Page 3 of 6

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U S Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B: None	A: $1 – $1,000	B: $1,001 – $15,000	C: $15,001 – $50,000	D: $50,001 – $100,000	E: $100,001 – $250,000	F: $250,001 – $500,000	G: $500,001 – $1,000,000	H: $1,000,001 – $5,000,000	I: $5,000,001 – $25,000,000	J: $25,000,001 – $50,000,000	K: Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: None	I: $1 – $200	II: $201 – $1,000	III: $1,001 – $2,500	IV: $2,501 – $5,000	V: $5,001 – $15,000	VI: $15,001 – $50,000	VII: $50,001 – $100,000	VIII: $100,001 – $1,000,000	IX: $1,000,001 – $5,000,000	X: Over $5,000,000	Block E: P, S, E
SP, DC, JT	*Examples* SP Mega Corp Stock						X							X										X								P
	Simon & Schuster			Indefinite																Royalties									X			
	1st Bank of Paducah, KY accounts							X								X										X						
JT	State of New Jersey - Pension								X																							
JT	Lenape Central School				X											X						X										
JT	County of Essex					X										X							X									
JT	County of Perth Australia				X											X						X										
JT	Advest: IBM				X									X								X										
JT	Republic Bancorp				X									X								X										

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name William James Pascrell, Jr.

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
JT	Ryan Beck				X											X								X								
JT	First Union National				X											X									X							
JT	Chase Manhattan		X													X									X							
JT	Republic National Bank						X									X										X						
JT	US Series E Bonds					X										X									X							
JT	US Series EE Bonds			X												X						X										
JT	Magellan Mutual Fund (IRA)			X												X																
JT	Magellan Mutual Fund (IRA)						X									X																
JT	First Union (IRA)			X												X																
JT	Putnam Tax Free (401K)				X											X							X									
JT	Franklin Variable Annuity					X										X																
JT	Hudson United Bank (IRA)				X											X																
JT	Vestin (Deferred Compensation)						X									X																
JT	Thrift Savings Plan				X											X																
JT	Travs American Life Ins (Annuity)						X									X																
JT	Evergreen Money Fund			X												X								X								

This page may be copied if more space is required.

Name William James Pascrell Jr | Page 5 of 6

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
JT	100 Shares IBM	X			10/25/99	X									

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Name	William James Roycroft Jr	Page 6 of 6

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Fire Departments Instructors Conf.	March 18-19	Wash. DC - Indianapolis ~~Wash DC~~ N.J.	Y	Y	N	N
	International Fire Chiefs Assn	Aug 30-31	~~Wash DC~~ N.J. - Kansas City, ~~Wash DC~~ N.J.	Y	Y	N	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

RECEIVED
00 MAY -2 PM 1:39
HAND DELIVERED
MC
(Office Use Only)

Edward L. Pastor
(Full Name)

1151 West Thomas Road
(Mailing Address)

Phoenix AZ 85013 — Daytime Telephone: 202-225-4065

Filer Status	[X] Member of the U S House of Representatives	State: AZ District: 02	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app. 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ed Pastor	04-27-00

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	US House of Representatives	Salary	$136,700 00
	WestEd, Inc.	Spouse Salary	$68,822.00
	Arizona State Retirement System	Spouse pension	$28,273.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St, Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
JT Residential lot, Guadalupe, AZ	$1,001 - $15,000	Capital Gains	None	NA
SP Bank One Checking Account, Phx, AZ	$1,001 - $15,000	Interest	$1 - $200	NA
SP AZ State Savings Federal CU (IRA)	$1,001 - $15,000	Interest	NA	NA
Bank One, Phoenix, AZ (IRA)	$1,001 - $15,000	Interest	NA	NA
SP AZ State Retirement Pension Fund	$50,001 - $100,000	Interest, capital gains, dividends	NA	NA
AZ State Retirement Pension Fund	$15,001 - $50,000	Interest, capital gains, dividends	NA	NA
AmerUS Life Ins Co.	$15,001 - $50,000	Dividends	$201 - $1,000	NA

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	AZ State FCU - Savings	$15,001 - $50,000	Interest	$1,001 - $2,500	NA
	Congressional Fed CU - Savings	$1,001 - $15,000	Interest	$201 - $1,000	NA
SP	PEBSCO Deferred Comp Plan, Phx, AZ	$15,001 - $50,000	Capital gains, interest, dividends	NA	NA
SP	T.I.A.A.-C.R.E.F.	$15,001 - $50,000	Interest, capital gains, contributions	NA	NA
SP	Guardian Park Avenue Fund A	$1,001 - $15,000	Capital gains, dividends	$201 - $1,000	NA
SP	Prudential Securities	$15,001 - $50,000	Capital gains, dividends, contributions	NA	NA
	Thrift Savings Plan, Washington, DC	$100,001 - $250,000	Cap gains, interest, contributions	NA	NA

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Bank of America, Phx, AZ	Mortgage on 1151 W Thomas Rd, Phx, AZ	$15,001 - $50,000
JT	Bank One, Phx, AZ	Equity Line of Credit on 1151 W Thomas Rd, Phx, AZ	$15,001 - $50,000
JT	Homeside Lending, Inc., San Antonio, TX	Mortgage on 1015 W Campbell, Phx, AZ	$50,001 - $100,000
	Norwest Mortgage, Palatine, IL	Mortgage on 649 C St., #304, Washington, DC	$50,001 - $100,000

Name Edward L. Pastor	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute	Mar. 19-21	Wash. DC-Hershey, PA-Wash. DC	Y	Y	Y	No
Democratic Leadership Council	April 30-May 2	Wash. DC-New Orleans, LA-Wash. DC	Y	Y	N	No
Congressional Hispanic Caucus Institute, PG&E Corp	Aug. 20-22	Phx-San Francisco, CA-Phx	Y	Y	Y	No
Microsoft, Boeing Co's	Aug. 23-25	SF-Seattle, WA-Phx	Y	Y	Y	No
US & Costa Rican Chambers of Commerce	Aug. 29-Sept. 3	Phx-San Francisco-Phx	Y	Y	Y	No
National Security Caucus Foundation	Oct. 1-3	WDC-Boston, MA-WDC	Y	Y	N	No
National Assn of Latino Elected Officials	Oct. 22-24	Wash. DC-Miami-Wash. DC	Y	Y	N	No
Fresh Produce Association	Dec. 2-4	Phx-Nogales-Phx	Y	Y	N	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I

Position	Organization
Member	Congressional Hispanic Caucus, Washington, DC
Member	Congressional Hispanic Caucus Institute, Washington, DC
Boardmember	National Association of Latino Elected Officials, Wash. DC
Boardmember	Neighborhood Housing Services of America, Oakland, CA

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 11 AM 9:32

MAY 10 2000 (9)
(Office Use Only)

Ronald E. Paul
(Full Name)

2422 Bluewater Highway
(Mailing Address)

Surfside, TX 77541

Daytime Telephone (409) 265-3034

Filer Status	[X] Member of the U.S. House of Representatives	State TX District 14	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Ron Paul	5/8/00

3363

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	Examples	SP Mega Corp Stock					X								X										X								P
DC		Simon & Schuster		Indefinite																	Royalties									X			
JT		1st Bank of Paducah, KY accounts						X									X									X							
		56 Flag Lake Plaza Lake Jackson, TX						X								X											X						
		C&R Shrimp Co., Inc. Lake Jackson, TX	X												Sub S Corporation											X	Terminated 12-31-99						
		Swim-Ten, Inc.-Lake Jackson, TX-Recreational						X							Sub S Corporation							X											
		58 Flag Lake Plaza, LJ, TX held by CARR, Ltd					X								Partnership Income											X							
		40 acres farmland, Hwy 332 LJ, TX held by Carona, Ltd						X							Partnership Income							X											
		Ron Paul & Assoc., Inc. LJ, TX - Newsletter Publ.	X																		NONE	X				Terminated 3-31-99							

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ronald E. Paul

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Condominium, 5300 Holmes Run Pkwy, Alexandria, VA						X													NONE	X										
	Acreage - 9 B.T. Archer, Lots 70-72, 30-33, 49 Oyster Creek, Texas					X														NONE	X										
	Lots 1&2 from above acreage + House, 500 Elm St, Oyster Creek, Texas	X															X							X							P/S
	Coins - Semi-numismatic						X													NONE	X										
	First National Bank of LJ Defined Benefit Account					X										X								X							
	First National Bank of LJ Lake Jackson, TX Savings					X										X									X						
	Congressional Frederal Credit Union, Wash DC			X												X							X								
	Texas Dow Employees Credit Union, Lake Jackson, TX			X												X						X									

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ronald E. Paul

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Texas Gulf Bank, N.A. Lake Jackson, TX					X										X							X									
	Alliance Treasury Reserves MMA ~~1345 Ave of the Americas~~ NY, NY						X									X							X									
	Rydex-Ursa Mutual Fund 6116 Exec Blvd #400 Rockville, MD				X									X							X											
	Oppenheimer Real Asset Mutual Fund, PO Box 5270 Denver, CO			X										X							X											
	Prudent Bear Mutual Fund 8140 Walnut Hill Ln #405 Dallas, TX			X										X								X										
	Pegasus Gold Inc. Common Stk			X										X							X											
	Amax Gold Inc Common Stk			X										X							X											
	Freeport McMoran Copper & Gold Inc Step-up conv. ~~Preferred shares~~				X									X										X								

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Ronald E. Paul

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Minorco Common Stock	X															X										X					S
	Sunshine Mining & Refinding Co. Common Stock			X										X							X											
	Dundee Bancorp Inc Class A Common Stock			X										X							X											
	Vista Gold Corp Common Stk			X										X							X											
	Royal Oaks Mines Common Stk			X										X							X											
	Newmont Corp Common Stock			X										X									X									
	Goldcorp Inc Class A Common				X									X							X											
	TVX Gold Inc Common Stock			X										X							X											
	WMC Limited Common Stock				X									X									X									
	Agnico Eagle Mines Ltd Common Stock			X										X							X											
	Echo Bay Mines Ltd Common				X									X								X										
	Battle Mtn Gold Co Common				X									X							X											
	Homestake Mining Co Common				X									X									X									
	Placer Dome Inc Common Stk				X									X								X										
	Barrick Gold Corp Common Stk						X							X								X										
	Glamis Gold Ltd Common Stk			X										X							X											
	Kinross Common Stock				X									X							X											P
	Franco Nevada Common Stock					X								X							X											P

This page may be copied if more space is required.

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SCHEDULE IV — TRANSACTIONS

Name Ronald E. Paul

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	House-500 Elm St., Oyster Creek, Texas	X			1-12-99			X							
	Kinross Common Stock	X			1-14-99	X									
	Minorco Common Stock		X		7-12-99		X								
	House-500 Elm St., Lots 1&2, Oyster Creek, TX		X		7-15-99			X							

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C —Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	American Association of Pro-Life OB-GYN	Feb. 5	Wash DC-Ft Lauderdale-Houston	Y	N	Y	N
	FORBES Magazine	Feb. 20	Wash DC-San Diego-Houston	Y	N	N	N
	Center for Libertarian Studies	June 12	Wash DC-San Francisco-Houston	Y	Y	Y	N
	LIBERTY Magazine	Sept. 18	Houston-Seattle-Houston	Y	Y	N	N
	Advocates for Self Government	Sept. 24	Wash DC-Atlanta-Houston	N	N	N	N
	Atlanta Area Speakers Bureau	Nov. 20	Houston-Atlanta-Houston	Y	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	Ronald E. Paul, M.D. Association
President	Ron Paul & Associates, Inc. -- TERMINATED 3-31-99
President	C & R Shrimp Co., Inc. -- TERMINATED 12-31-99
President	Swim-Ten, Inc.
Partner	Carona Limited
Partner	CARR, Ltd.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Honorary Chairman	Foundation for Rational Economics and Education, Inc.
Honorary Chairman	Liberty Study Committee

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 PM 6:40

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Donald Milford Payne
(Full Name)

21 Bock Avenue
(Mailing Address)

Newark NJ 07112

Daytime Telephone: (202) 225-3436

HAND DELIVERED (10)

MC (Office Use Only)

Filer Status [X] Member of the U.S. House of Representatives — State: NJ District 10 — [ ] Officer or Employee — Employing Office:

Report Type [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ] No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ] No [X]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Donald M Payne	5-15-00

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Name	Page ___ of ___

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name	Page ___ of ___

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committe on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500

Name Donald Milford Payne	Page ____ of ____

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source** Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year **Exclude** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	BLOCK B **Value of Asset** at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None "	BLOCK C **Type of Income** If other than one of the listed categories, specify the type of income by writing a brief description in this block.	BLOCK D **Amount of Income** For retirement plans that do not allow you to choose specific investments, you may write "NA" for Income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	BLOCK E **Transaction** Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:* SP Mega Corp. Stock SP 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
First Union Bancorp Stock	$50,001 - $100,000	Dividends	$1,001 - $2,500	
19 Bock Avenue, Newark, New Jersey	$100,001 - $250,000	Rent	$5,001 - $15,000	
Merck & Co. Stock	$15,001 - $50,000	Dividends	$201 - $1,000	
Copeland Co. Pension Plan	$50,001 - $100,000	Pension	None	
Smith Barney Shearson IRA	$100,001 - $250,000	IRA	None	
Mail.Com Stock	$1,001 - $15,000	Dividends	None	

Name Donald Milford Payne	Page ____ of ____

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000

Name Donald Milford Payne	Page ___ of ___

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	First Union Bank, Newark, New Jersey	Mortgage on 19 Bock Avenue	$50,001 - $100,000

Name	Page ____ of ____

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270

Name Donald Milford Payne	Page ____ of ____

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug.6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Aspen Institute Conference on U.S. China Relations	March 28 - April 5	Newark-Beijing-Shanghai-Newark	Y	Y	Y	2
Aspen Institute Conference on U.S. - Russia Relations	August 16 -21	Newark-Berlin-Newark	Y	Y	Y	6
Institute for Democratic Strategies	November 5 - 8	Newark-Canary Islands-Newark	Y	Y	Y	None

Name Donald Milford Payne	Page ____ of ____

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Board of Trustees	Newark Boys' and Girls' Clubs
Board of Directors	Newark Day Center
Board of Directors	Newark YMWCA
Board of Directors	Congressional Black Caucus Foundation
Board of Directors	Newark Fighting Back Initiatives
Board of Directors	National Endowment for Democracy

Name	Page ___ of ___

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY -8 AM 11:00
CLERK
HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

3

Edward Allan Pease
(Full Name)

119 Cannon House Office Building
(Mailing Address)

202-225-5805
Daytime Telephone

Filer Status	[X] Member of the U S House of Representatives	State ____ District ____	[ ] Officer or Employee	Employing Office ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Edward Pease	4-26-00

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Name Edward A Pease

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	BLOCK A		BLOCK B												BLOCK C							BLOCK D											BLOCK E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples* SP	Mega Corp Stock					X								X										X								P
		Simon & Schuster		Indefinite																	Royalties									X			
		1st Bank of Paducah, KY accounts						X									X									X							
		Teachers Insurance & Annuity Association/ College Retirement Equities Fund							X													N/A											
		Massachusetts Mutual Life Insurance Company						X														N/A											

For additional assets and unearned income, use next page.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Member of the Board*	Wabash Valley Council, Boy Scouts of America
Director*	Historic Landmarks Foundation of Indiana
Director*	Visiting Nurses Association/Hospice
Director/President**	National Interfraternity Conference and NIC Foundation

*Served during 1999, but does not now.

**The name of the National Interfraternity Conference was changed to the North American Interfraternity Conference in December, 1999.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	TIAA/CREF (see Schedule III)	Retirement Annuity
	State of Indiana Public Employees Retirement Fund	Pension

Use additional sheets if more space is required.

INSIDE MAIL

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, Officers, and Employees

RECEIVED
FEC MAIL CENTER
00 MAY 16 AM 10:04

U.S. HOUSE OF REPRESENTATIVES
00 MAY 15 PM 8:21
(21)
mc

Nancy Pelosi
(Full Name)

One Bush Street
(Mailing Address)

San Francisco CA 94104

Daytime Telephone: 415-788-8600

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 08	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ] No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X] No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

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CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Nancy Pelosi	5/15/2000

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SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Nancy Pelosi	None	NA
	Financial Leasing Services	Spouse Salary	NA
	Isolep Enterprises	Spouse Management Fee	NA
	Potomac Investments Associates	Spouse Management Fee	NA
	Yerac Associates (Carey Associates)	Spouse Management Fee	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II -- PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium.
A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$ 500
None				

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:*	SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
SP	Access Technology Partners	$100,001 - $250,000	Investment -No Income	None	P
SP	Adaytum - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP SP	Adforce, Inc. - Common Stock Advanced Fibre Communications - Public Common Stock	$15,001-$50,000 $500,001 - $1,000,000	Investment -No Income Investment - Capital Gain	None $100,001 - $1,000,000	P Partial Sale
SP SP	Affiliated Research - Common Stock Alza Corp Com - Public Common Stock	$1,001-$15,000 $50,001 - $100,000	Investment - No Income Investment - No Income	None None	P P
SP SP	Agile - Common Stock Amazon. Com - Public Common Stock	$15,001-$50,000 $500,001 - $1,000,000	Investment -No Income Investment - No income	None None	P P
SP	America OnLine, Inc - Public Common Stock	$100,001 - $250,000	Investment - No Income	None	P

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Andover, Inc. - Public Common Stock	$15,001 - $50,000	Investment - No Income	None	P
SP	Apogee - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Aristotle - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Ashlar, Inc. Sunnyvale, CA - Common Stock	$50,001 - $100,000	Investment - No income	None	NA
SP	Auberge de Soleil, Rutherford, CA - Owns resort hotel	$500,001 - $1,000,000	Dividends/Rent	$100,001-$1,000,000	NA
SP	Bank of America, San Francisco, CA	$15,001 - $50,000	Interest	$1 - $200	NA
SP	Beringer - Public Common Stock	-0-	Capital Gain	$1,001-$15,000	S
SP	Borel Estate Company - Owns shopping center	$100,001 - $250,000	Rent/Interest	$15,001 - $50,000	NA
SP	Biz2bn, Inc. - Common Stock	$15,001-$50,000	Investment - No income	None	P
JT	BF Enterprises - Public Common Stock	$15,001 - $50,000	Investment - No income	None	NA
SP	Ben & Jerry's Homemade, Inc. - Public Common Stock	$100,001 - $250,000	Investment - No income	None	P
SP	Calico - Common Stock	$1,001-$15,000	Investment - No Income	None	P
SP	Carey International, Inc. - Common Stock	$250,001 - $500,000	Investment - Capital Gain	$100,001 - $1,000,000	Partial Sale
SP	Cascade - Common stock	$15,001 - $50,000	Investment - No income	None	P
SP	Castelle - Common Stock	-0-	Capital Gain	$1,001-$15,000	S
SP	Chalone Wine Group - Public Common Stock	$15,001 - $50,000	Investment - Dividend	$15,001 - $50,000	NA
SP	Cobalt Networks - Public Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Collaborative - Common Stock	$1,000-$15,000	Investment - No Income	None	P
SP	Collectors Universe, Inc - Public Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Command Audio - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Commerce One - Common Stock	$50,001 - $100,000	Investment - No income	None	P
SP	Computrad - Public Common Stock	-0-	Capital Gain	$1,001-$15,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Congressional Credit Union, Washington, DC	$15,001 - $50,000	Interest	$201 - $1,000	NA
SP	CopperCom - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Covalent - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Critical Path Inc. - Public Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Crossworlds Software - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Digital Fountain - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Digital Intelligence - Common Stock	$1,001 - $15,000	Investmnt - No income	None	P
SP	EDI Associates, Mill Valley, CA - Hotel Investment	$250,001 - $500,000	Dividends/Rent	$50,001 - $100,000	NA
SP	441 South Folsom - R.E. Investment	$15,001-$50,000	Investment - No income	None	P
SP	EMAX - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Entertainment Express	-0-	Investment-Capital Gain	$100,001-$1,000,000	S
SP	Financial Leasing Services, S.F., CA - Investment Company	$500,001 - $1,000,000	N/A	None	NA
SP	Fiberstar -Common Stock	-0-	Investment - Capital Gain	$1,001-$15,000	S
SP	Force Energy - Common Stock	$1,001 - $15,000	Investment - No income	None	NA
SP	Fritz Companies - Public Common Stock	-0-	Investment - Capital Gain	$1,001-$15,000	S
SP	Forty-Five Belden Corp. S.F., CA - Investment Company	$500,001 - $1,000,000	Dividends	$100,001 - $1,000,000	NA
SP	Front Line - Common Stock	$15,001-$50,000	Investment - No income	None	P
SP	Giganet - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Fusion Medical - Common Stock	-0-	Investment - Capital Gain	$1,001-$15,000	S
SP	Glyphica - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Garden Escape - Common Stock	$15,001-$50,000	Investment - No income	None	P
SP	Gap, Inc. - Public Common Stock	$100,001 - $250,000	Investment - No income	None	P
SP	Getthere.Com - Public Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Glyphica - Common Stock	$1,001-$15,000	Investment - No income	None	P
SP	Getty Images, Inc (Getty Communications) - Public Common Stock	$15,001 - $50,000	Investment - No income	None	NA
SP	Hambrecht & Quist - Common Stock	-0-	Investment - Capital Gain	$250,000 - $500,000	S

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

SP	Infogear - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Infospace – Common Stock	$15,000-$50,000	Investment-No income	None	P
SP	Intraop Medical - Common Stock	$50,001 - $100,000	Investment - No income	None	P
SP	Japan Partners - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	LEG III - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Lions Gate Limited Partnership - Golf Development Partnership	$250,001 - $500,000	Investment - No income	None	P
SP	Lucent Technologies - Public Common Stock	$50,001 - $100,000	Investment - No income	None	P
SP	Mainstreet - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	McGrath Rentcorp -Public Common Stock	$500,001 - $1,000,000	Investment - Dividends	$15,001 - $50,000	NA
SP	Mercury Interactive – Public Common Stk.	-0-	Investment – Capital Gain	$15,001-$50,000	S
SP	MedicaLogic Inc. - Public Common Stock	$1,000,001 - $5,000,000	Investment - No income	None	P
SP	Mosher Partners, LP, Sacramento, CA R.E. Partnership	$500,000-$1,000,000	Investment -No Income	None	NA
SP	MP3.Com - Public Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Navis – Common Stock	$1,001-$15,000	Investment – No Income	None	P
SP	Netzero, Inc. - Public Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Netscape – Public Common Stock	-0-	Investment – Capital Gain	$1,001-$15,000	S
SP	Nexibit - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Nations (Now Bank of America), Washington, DC - Savings Account	$15,001 - $50,000	Interest	$201 - $1,000	NA
SP	Nautilus Leasing Services - Container leasing company	$50,001 - $100,000	None	None	NA
SP	Nine Hundred One Battery Street	$50,001 - $100,000	Rent	$5,001 - $15,000	NA
SP	Nine Forty Five Battery, San Francisco, CA - Real Estate Partnership	$1,000,001 - $5,000,000	Rent	$100,001 - $1,000,000	P
SP	Odwalla – Public Common Stock	-0-	Investment – Capital Gain	$15,000-$50,000	S
SP	OnDisplay, Inc. - Public Common Stock	$250,001 - $500,000	Investment - No income	None	P
SP	Pacific Microsonics	$1,001 - $15,000	Investment - No income	None	P
SP	Pegasus – Public Common Stock	-0-	Investment – Capital Gain	$1,001-$15,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Pensare - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	PIA-A Avenel, Potomac, MD R.E. Dev.	$100,001-$250,000	Investment - Capital Gains	$50,001-$100,000	NA
SP	PIA-Natelli Communities, Gathersburg, MD - Real Estate development company	$250,001 - $500,000	Investment - No income	None	NA
SP	Piatti Restaurant Company, Tiburon, CA - Restaurant Operating Company	$1,000,001 - $5,000,000	Dividends - Capital Gains	$100,001 - $1,000,000	NA
SP	Plumtree -Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Potomac Investment Assoc., Gaithersburg, MD	$500,000-$1,000,000	Dividends-Capital Gains	$100,001-$1,000,000	NA
SP	Rainmaker - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Ravenswood Winery Inc., - Public Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	Read-Rite Corp., - Public Common Stock	$15,001 - $50,000	Investment - No income	$15,001-$50,000	Partial Sale
SP	Robert Half International - Public Common Stock	$1,000,001 - $5,000,000	Investment - No income	$100,001-$1,000,000	Partial Sale
SP	Salon.Com - Public Common Stock	$1,001 - $15,000	Investment - no income	None	P
SP	San Ysidro Ranch Ltd. Partners	$100,001 - $250,000	Investment - No income	None	NA
SP	San Ysidro Ranch Management company - Manages resort hotel	$100,001 - $250,000	Investment - No income	None	NA
SP	SERA Technologies - Common Stock	$1,001-$15,000	Investment - No income	None	P
SP	SnapTrack - Common stock	$15,001 - $50,000	Investment - No income	None	P
SP	Stairmaster Sports Medical Products - Common Stock	$15,001 - $50,000	Investment - No income	None	NA
SP	Stoneridge LLC	$500,001 - $1,000,000	Investment - No income	None	NA
SP	TellLabs, Inc. - Public Common Stock	$250,001 - $500,000	Investment - Capital Gains	$100,001 - $1,000,000	Partial Sale
SP	TicketMaster On-Line CitySerach - Public Common Stock	$50,001 - $100,000	Investment - No income	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Thirteen Hundred One Sansome LLC - Real Estate Partnership	$1,000,001 - $5,000,000	Rent	$50,001 - $100,000	NA
SP	Tripath - Common Stock	$1,001-$15,000	Investment - No income	None	P
SP	Trux Gate Associates Ltd. - Real Estate Partnership	$250,001 - $500,000	None	None	NA
SP	Union Bank of California, San Francisco, CA - Savings Account	$1,001 - $15,000	Interest	$201 - $1,000	NA
SP	USWeb - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	V3 Semiconductor - Public Common Stock	$250,001 - $500,000	Investment - No income	None	P
SP	Vanguard Airlines, Inc. - Public Common Stock	$50,001 - $100,000	Investment - No income	None	NA
SP	Virtualis - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Wavtrace - Common Stock	$15,001 - $50,000	Investment - No income	None	P
SP	2Way - Common Stock	$1,001 - $15,000	Investment - No income	None	P
JT	Wells Fargo Bank, San Francisco, CA - Savings account	$1,001 - $15,000	Interest	$201 - $1,000	NA
SP	Xpedior, Inc. - Common Stock	$50,001 - $100,000	Investment - No income	None	P
SP	Yantra - Common Stock	$1,001 - $15,000	Investment - No income	None	P
SP	Yerac Associates - Investments	$1,000,001 - $5,000,000	Investment -Capital Gains	$100,001-$1,000,000	NA
SP	You Tools - Common Stock	$15,001 - $50,000	Investment - No income	None	P
JT	Alpine Place, Alpine Meadows, CA - Condominium Apartment	$250,001 - $500,000	None	None	NA
SP	45 Belden Place, San Francisco, CA - Four story commercial building	$1,000,001 - $5,000,000	Rent	$100,001 - $1,000,000	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

JT	Skellenger Lane, Napa, CA - 8 acre vineyard	$1,000,001 - $5,000,000	Rent	$100,001 - $1,000,000	NA
JT	Zinfandel Lane, St. Helena, CA - 18 acre vineyard and rental property	$1,000,001 - $5,000,000	Rent	$100,001 - $1,000,000	NA
JT	1600 Atlas Peak Road, Napa, CA - Real Estate investment	$250,001 - $500,000	Rent	$15,001 - $50,000	NA
SP	25 Point Lobos, San Francisco, CA - Commercial Property	$1,000,001 - $5,000,000	Rent	$100,001 - $1,000,000	NA
JT	K. Street, Washington, DC - Rental property	$500,001 - $1,000,000	Rent	$50,001 - $100,000	P
JT	Broadway Property, San Francisco, CA - Real Estate Option	$100,001 - $250,000	None	None	P
JT	Webster Street, San Francisco, CA	None	Capital Gains	$100,001 - $1,000,000	S

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Access Technology Partners - Common stock (Increased Investment)	Purchase	4X Various Dates	$100,001 - $250,000
SP	Adaytum - Common Stock	Purchase	10/27/99	$1,001 - $15,000
SP	Adforce - Common Stock	Purchase	07/17/99	$1,001 - $15,000
SP	Advanced Fibre Communications - Common Stock (Partial Sale)	Sold	08/26/99	$100,001 - $250,000
SP	Affiliated Research Investors	Purchase	08/19/99	$1,001 - $15,000
SP	Agile - Common Stock	Purchase	07/17/99	$15,001 - $50,000
SP	Alza Corp - Public Common Stock	Purchase	12/23/99	$50,001 - $100,000
SP	Amazon.Com - Public Common Stock	Purchase	5X Various Dates	$500,001 - $1,000,000
SP	America OnLine, Inc. - Public Common Stock	Purchase	08/11/99	$100,001 - $250,000
SP	Andover - Public Common Stock	Purchase	12/15/99	$15,001 - $50,000
SP	Apogee - Common Stock	Purchase	10/01/99	$15,001 - $50,000
SP	Aristotle Publishing - Common Stock	Purchase	10/27/99	$15,001 - $50,000
SP	Ben & Jerry's Homemade, Inc.	Purchase	12/9/99	$100,001 - $250,000
SP	Berringer - Public Common Stock	Sold	1/10/99	$1,001 - $15,000
SP	BizFon, Inc. - Public Common Stock	Purchase	9/9/99	$15,001 - $50,000
SP	Castelle - Public Common Stock	Sold	01/10/99	$1,001 - $15,000
SP	Calico – Common Stock	Purchase	10/21/99	$1,001–$15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Carey International - Public Common Stock (Partial Sale)	Sold	3X Various Dates	$500,001 - $1,000,000
SP	Cascade - Common Stock	Purchase	3X Various Dates	$15,001 - $50,000
SP	Cobalt Networks - Common Stock	Purchase	11/17/99	$15,001 - $50,000
SP	Collectors Universe - Common Stock	Purchase	11/5/99	$1,001 - $15,000
SP	Collaborative - Common Stock	Purchase	12/18/99	$1,001 - $15,000
SP	Command Audio - Common Stock	Purchase	2X Various Dates	$15,001 - $50,000
SP	Commerce One - Common Stock	Purchase	6/3/99	$50,001 - $100,000
SP	Compurad - Common Stock	Sold	1/10/99	$15,001 - $50,000
SP	Coppercom - Common Stock	Purchase	2X Various Dates	$1,001 - $15,000
SP	Covalent - Common Stock	Purchase	12/27/99	$1,001 - $15,000
SP	Critical Path - Common Stock	Purchase	01/17/99	$15,001 - $50,000
SP	Crossworlds Software - Common Stock	Purchase	05/17/99	$1,001 - $15,000
SP	Digital Fountain - Common Stock	Purchase	7/8/99	$1,001 - $15,000
SP	Digital Intelligence - Common Stock	Purchase	12/22/99	$1,001 - $15,000
SP	Entertainment Express	Sold	06/28/99	$100,001 - $250,000
SP	EMAX - Common Stock	Purchase	07/21/99	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	*Mega Corporation Common Stock*	*Purchase*	*10/12/1999*	*$15,001 - $50,000*
SP	441 South Folsom - R.E. Investment	Purchase	10/12/99	$15,001-$50,000
SP	FiberStar - Public Common Stock	Sold	01/10/99	$1,001 - $15,000
SP	Fritz Companies - Public Common Stock	Sold	1/10/99	$1,001 - $15,000
SP	Frontline - Common Stock	Purchase	08/04/99	$15,001 - $50,000
SP	Fusion Medical - Common Stock	Sold	01/10/99	$1,001 - $15,000
SP	Gap - Public Common Stock	Purchase	12/7/99	$100,001 - $250,000
SP	Garden Escape - Common Stock	Purchase	7/17/99	$15,001 - $50,000
SP	Getthere.Com - Public Common Stock	Purchase	11/29/99	$15,001 - $50,000
SP	GigaNet - Common Stock	Purchase	11/10/99	$15,001 - $50,000
SP	Glyphica - Common Stock	Purchase	11/16/99	$1,001 - $15,000
SP	Hambrecht & Quist - Common Stock	Sold	11/2/99	$250,001 - $500,000
SP	Infogear - Common Stock	Purchase	2X Various Dates	$1,001 - $15,000
SP	InfoSpace - Common Stock	Purchase	9/9/99	$15,001 - $50,000
SP	Intraop Medical Inc - Common Stock	Purchase	07/19/99	$50,001 - $100,000
SP	Japan Partners - Common Stock	Purchase	2X Various Dates	$15,001 - $50,000
SP	Leg III - Common Stock	Purchase	03/24/99	$1,001 - $15,000
SP	Lion's Gate Limited Partnership	Purchase	3X Various Dates	$250,001 - $500,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Lucent Technologies - Public Common Stock	Purchase	01/10/99	$50,001 - $100,000
SP	Mainstreet - Common Stock	Purchase	2X Various Dates	$1,001 - $15,000
SP	Medicalogic - Public Common Stock	Purchase	12/15/99	$500,001-$1,000,000
SP	Mercury Interactive - Public Common Stock	Sold	01/10/99	$15,001 - $50,000
SP	MP3 - Public Common Stock	Purchase	07/26/99	$1,001 - $15,000
SP	Navis - Common Stock	Purchase	11/25/99	$1,001 - $15,000
SP	Netscape - Public Common Stock	Sold	01/10/99	$1,001 - $15,000
SP	NetZero - Common Stock	Purchase	09/29/99	$1,001 - $15,000
SP	Nexibit - Common Stock	Purchase	6/3/99	$1,001 - $15,000
SP	Odwalla - Public Common Stock	Sold	12/28/99	$15,001 - $50,000
SP	OnDisplay - Public Common Stock	Purchase	2X Various Dates	$250,001 - $500,000
SP	Pacific Microsonics - Common Stock	Purchase	08/04/99	$1,001 - $15,000
SP	Pegasus - Public Common Stock	Sold	1/10/99	$1,001 - $15,000
SP	Pensare - Common Stock	Purchase	12/2/99	$15,001 - $50,000
SP	Plumtree - Common Stock	Purchase	07/28/99	$15,001 - $50,000
SP	Rainmaker - Common Stock	Purchase	03/01/99	$1,001 - $15,000
SP	Ravenswood - Public Common Stock	Purchase	04/9/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	Read-Rite Corp Public Common Stock (Partial Sale)	Sold	12/28/99	$15,001 - $50,000
SP	Robert Half International - Public common Stock (Partial Sale)	Sold	12/31/99	$100,001 - $250,000
SP	Salon - Public Common Stock	Purchase	06/22/99	$1,001 - $15,000
SP	SERA Technologies - Common Stock	Purchase	08/05/99	$1,001 - $15,000
SP	Snap Track - Common Stock	Purchase	01/14/99	$15,001 - $50,000
SP	Stairmaster Sports/Medical Products- Common Stock	Purchase	12/22/99	$15,001 - $50,000
SP	TellLabs, Inc Public Common Stock (Partial Sale)	Sold	3X Various Dates	$500,001 - $1,000,000
SP	Tripath - Common Stock	Purchase	10/21/99	$1,001 - $15,000
SP	US Web - Common Stock	Purchase	2X Various Dates	$1,001 - $15,000
SP	V3 Semiconductor, Inc. - Public Common Stock	Purchase	2X Various Dates	$15,001 - $50,000
SP	Virtualis - Common Stock	Purchase	07/08/99	$1,001 - $15,000
SP	2Way - Common Stock	Purchase	07/08/99	$1,001 - $15,000
SP	Wavetrace - Common Stock	Purchase	2X Various Dates	$15,001 - $50,000
SP	Yantra - Common Stock	Purchase	07/28/99	$1,001-$15,000
SP	You Tools - Common Stock	Purchase	05/17/99	$1,001 - $15,000
SP	Xpedior - Public Common Stock	Purchase	12/21/99	$50,001 - $100,000
SP	945 Battery Street, LLC	Purchase	01/01/99	$500,001 - $1,000,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
JT	K Street, Washington, DC	Purchase	03/30/99	$500,001 - $1,000,000
JT	Broadway, San Francisco, CA - Real Estate Option	Purchase	07/17/99	$500,001 - $1,000,000
SP	Webster Street, San Francisco, CA	Sold	06/26/99	$500,001 - $1,000,000

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts only if the balance at the close of preceding calendar year

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
JT	Bank of America	Mortgage on 2555 Pennsylvania Avenue	$50,001 - $100,000
JT	Bank of America	Mortgage on 11 Zinfandel lane, St. Helena, CA	$1,000,001 - $5,000,000
JT	Bank of America	Mortgage on 3030 K Street	$500,001 - $1,000,000
SP	First Union	Mortgage on 25 Point Lobos Avenue, San Francisco, CA	$1,000,001 - $5,000,000
JT	Placer Sierra Bank	Mortgage on #19 Alpine Place, Tahoe City, CA	$50,001 - $100,000
SP	Wells Fargo	Mortgage on 45 Belden Place, San Francisco, Ca	$500,001 - $1,000,000
JT	World Savings	Mortgage on 1600 Atlas Peak Rd., Napa, CA	$100,001 - $250,000
SP	Bank of America	Line of Credit	$250,001 - $500,000
SP	Union Bank of California	Line of Credit	$500,001 - $1,000,000
SP	Chase Hambrecht & Quist	Margin Account	$500,001 - $1,000,000
SP	Golden Gate Bank	Loan: 1301 Sansome LLC	$250,001 - $500,000

SCHEDULE VI -- GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.
Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.
Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (waiver received from Committee on Standards)	$270
None		

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 8-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Congressional Research Service New Member Orientation	01/11/99	DC-Williamsburg-DC	N	Y	N	None
Bi Partisan Retreat	03/19/99-3/21/99	DC-Hershey, PA-DC	Y	Y	N	None
Democracy for China Fund Conference	06/2/99-06/3/99	DC, Cambridge, MA, DC	Y	Y	N	None
Los Angeles Convention Event	10/15/99	Dulles - Los Angeles	N	N	N	None
American Israel Public Affairs Committee	11/15/99	Baltimore-Del Rey, Florida, Baltimore	N	Y	N	None

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Board of Directors	National Italian American Foundation

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
N/A		

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

Collin C. Peterson
(Full Name)

26192 Floyd Lake Point Road
(Mailing Address)

Detroit Lakes MN 56501-7607

Daytime Telephone: 202-225-2165

Filer Status	[X] Member of the U.S. House of Representatives	State: MN District: 07	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** — Yes [X] No [ ]

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II** — Yes [ ] No [X]

III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** — Yes [X] No [ ]

IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.** — Yes [ ] No [X]

V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** — Yes [X] No [ ]

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** — Yes [ ] No [X]

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** — Yes [X] No [ ]

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** — Yes [X] No [ ]

IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** — Yes [X] No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS–Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? (See Instructions, pages 10-11.) — Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.) — Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C 1001).

SIGNATURE OF REPORTING INDIVIDUAL **DATE** (Month/Day/Year) 5-10-00

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000. For further information, see Instructions, pages 12-13.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Hall for Congress Committee	musician fee	$300 00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed,* list the underlying assets worth more than $1,000. For an IRA or retirement plan that is *not* self-directed, name the institution holding the account. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left. For further information, see Instructions, pages 14-20	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:* Mega Corp Stock	$15,001 - $50,000	Dividends	$201 - $1,000	P
SP 123 Main St., Dover, Del.	$250,001 - $500,000	Rent	$1,001 - $2,500	
1st Bank of Paducah, KY accounts	$50,001 - $100,000	Interest	$5,001 - $15,000	
Peterson Fox, Inc. - common stock	$50,001 - $100,000	common stock	None	
Lakeland Estates, Inc. - notes/common stock	$15,001 - $50,000	interest, capital gains	None	
Lakewest Properties - partnership	$15,001 - $50,000	Rent	$5,001 - $15,000	
Bekkerus Schott & Co. - contract	$50,001 - $100,000	interest, capital gains	$5,001 - $15,000	
Technimar Industries, Inc.- stock	$15,001 - $50,000	common stock	None	NA

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SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year
Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000. For further information, see Instructions, pages 21-22.

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	Peterson Fox, Inc.: 50% ownership	demand loan created when the stock was issued 1/1/90	$15,001 - $50,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information, see Instructions, pages 24-26.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples. Chicago Chamber of Commerce	Mar.2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
Winn-Dixie Stores, Inc	1/8/99-1/10/99	DCA-JAX-DCA	Y	Y	N	none
Safari Club International	1/20/99-1/24/99	DCA-MSP-RNO	Y	Y	N	none
Oceanspray Cranberries Inc.	2/5/99-2/8/99	DCA-TPA-DCA	Y	Y	N	none
Americans for Fair Taxation	8/22/99-8/26/99	BHM-IAH-ATL-PHX-BWI	Y	Y	N	none
Americans for Fair Taxation	9/13/99-	DCA-LGA-DCA	N	N	N	none
Ducks Unlimited, Inc.	10/8/99-10/12/99	DCA-YEG-DCA (personal expense)	Y	Y	N	none
Dairy Farmers of America	10/15/99-10/17/99	Mobridge, SD (personal expense)	Y	Y	N	none

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. For further information, see Instructions, page 26

Exclude: Positions held in any religious, social, fraternal, or political entities, positions solely of an honorary nature; and positions listed on Schedule I

Position	Organization
President & Unpaid Director	Peterson Fox, Inc.
President & Unpaid Director	Lakeland Estates, Inc
Partner	Lakewest Properties

SCHEDULE IX -- AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, pages 26-27

Date	Parties To	Terms of Agreement
12/27/90	self & Bekkerus Schott & Co., Ltd.	payments for former business payable over 6 years

00 JUN -7 PM 1:38

HAND DELIVERED

(Office Use Only)

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3413

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

John E. Peterson
(Full Name)

248 N Main
(Mailing Address)

Daytime Telephone:
814/589-5241

Pleasantville PA 16341

Filer Status	[X] Member of the U S House of Representatives	State PA District 05	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more tha 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	John E Peterson	6-7-2000

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commonwealth of Pennsylvania	pension	$15,060.00

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples* SP	Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
	288 N. Main, Pleasantville, PA	$50,001 - $100,000	Rent	$2,501 - $5,000	NA
	130 N. 2nd St., Pleasantville, PA	$15,001 - $50,000	Rent	$2,501 - $5,000	NA
	IDS Growth Fund, Class A	$50,001 - $100,000	Capital Gains	$1,001 - $2,500	NA
	Prudential-Commn Fund	$15,001 - $50,000	Variable Appreciable life	None	NA
	Prudential Utility Fund	$15,001 - $50,000	Interest	None	NA
	Prudential Natural Resource Fund	$15,001 - $50,000	Variable Appreciable Life	None	NA
	Prudential High Dividend Fund	$1,001 - $15,000	Variabel Appreciable Life	None	NA

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	Prudential Equity Fund	$1,001 - $15,000	IRA	None	NA
	Franklin Templeton Fund	$15,001 - $50,000	IRA	None	NA
	Northstar Growth Fund	$15,001 - $50,000	IRA	None	NA
	Putnam Fund	$15,001 - $50,000	IRA	None	NA
	Larbarge, Inc	$1,001 - $15,000	Dividends	$201 - $1,000	NA
	Braintech Stock	$1 - $1,000	Capital Gains	$2,501 - $5,000	P AND S
	Blair Corp Stock	$1,001 - $15,000	Capital Gains	None	NA
	ERHC Stock	$1 - $1,000	Capital Gains	None	NA
	Northwest Bancorp Stock	$1,001 - $15,000	Capital Gains	None	NA
	Webco IND Stock	$1,001 - $15,000	Capital Gains	None	NA

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Webco Industries Stock	Purchase	2-11-99	$1,001 - $15,000
	Blair Corp Stock	Purchase	1-8-99	$1,001 - $15,000
	Northwest Bankcorp	Purchase	2-11-99	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del	$100,001 - $250,000
	Northwest Savings Bank	Prime Line of Credit	$15,001 - $50,000

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 12 AM 9:20

(11)

HAND DELIVERED
(Office Use Only)

THOMAS E. PETRI
(Full Name)

N5329 DE NEVEU LANE
(Mailing Address)

FOND DU LAC, WISCONSIN 54935

920-922-1180
Daytime Telephone

Filer Status	☑ Member of the U.S. House of Representatives	State WISCONSIN District SIXTH	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes ☑	No ☐
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes ☑	No ☐
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III**	Yes ☑	No ☐
IV. Did you, your spouse, or dependent child purchase, sell or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes ☑	No ☐
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes ☑	No ☐
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes ☐	No ☑
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes ☑	No ☐
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes ☑	No ☐
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes ☐	No ☑

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes ☐	No ☑
EXEMPTION— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001)

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	Thomas E. Petri	May 8, 2000

3419

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	American Council of Trustees and Alumni	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name T.E. PETRI | Page 3 of 11

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
Examples XYZ Magazine	Article	Aug. 13, 1999	$500
K HART FAMILY FOUNDATION	RAISING MARKET DRUGS	SEPT. 22, 1999	$500
LABOR POLICY ASSOCIATION	SPEECH	SEPT. 10, 1999	$2,000
PAUSTON GATES ELLIS & DOUGLAS MEEDS	SPEECH	MARCH 23, 1999	$1,000
RAILWAY PROGRESS INSTITUTE	SPEECH	APRIL 9, 1999	$2,000
ASSOCIATION OF AMERICAN RAILROADS	SPEECH	APRIL 10, 1999	$1,000

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Name T. E. Potri | Page 4 of 11

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset (A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000)	Block C: Type of Income (DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example; Partnership Income or Farm Income))	Block D: Amount of Income (I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000)	Block E: Transaction (P, S, E)
SP, DC, JT	Examples: SP Mega Corp Stock	E	DIVIDENDS	VI	P
	Simon & Schuster	Indefinite	INTEREST	IX	
	1st Bank of Paducah, KY accounts	F	INTEREST	VI	
	Wisconsin Retirement Acct.	E	DIVIDENDS, INTEREST, CAPITAL GAINS	NA	
	Strong Growth Fund	D	DIVIDENDS, INTEREST, CAPITAL GAINS	NA	P
	Janus Worldwide Fund	F	DIVIDENDS, INTEREST, CAPITAL GAINS	NA	P
	Janus Fund	E	DIVIDENDS, INTEREST, CAPITAL GAINS	NA	P
	AIM Fund (Growth)	D	DIVIDENDS, INTEREST, CAPITAL GAINS	NA	P
	IVY International Cl B	D	DIVIDENDS, INTEREST, CAPITAL GAINS	NA	P

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name T. E. Petri

Page 5 of 11

SP. DC. JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P. S. E
L	Firstar Corp., Stock									X				X													X					P, S
	American Home Products Stock				X									X									X									
	American Express, Stock						X							X									X									
L	Walgreen Co., Stock										X			X												X					S
L	Bayer A.G.					X								X										X								
	Associated Bancorp, Stock			X										X								X										
	Dole Co., Stock			X										X									X									
	Overseas Shipholding Grp, Stock				X									X										X								S
	Castle & Cooke, Stock			X																	X											
	Marshall & Ilsley Bk, Stock								X					X												X						
	Northwest Mutual Life In 2				X									X										X								
	Berkshire Hathaway, Stock							X													X											P
	U.A.L. Corp., Stock			X																	X											
	Lloyd's of London								X							X	X												X			P, S
	Merrill Lynch Cash Mgt Acct						X									X										X						
	Firstar Trust, Cash			X												X						X										
	Firstar U.S. Treasury Fund						X									X								X								
	U.S. Treasury Bonds				X											X								X								
	A.T.&T. Corp. Stock				X									X									X									
	Vodamone** Airtouch, Stock				X									X								X										
	SBC Communications Stock						X							X										X								
	Airtouch, Stock				X																X											E

* Formally called "Vertical" ** Formally "Airtouch" *** "Vodaitouch" merges into.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name T. E. Petri

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	Ameritech, Stock					X								X										X								E
	American Electric Power, Stock				X									X										X								S
	Bell Atlantic, Stock				X									X									X									
	Bellsouth, Stock				X									X									X									
	Lucent Tech., Stock				X									X																		
	NCR Corp., Stock		X																		X											
	U.S. West, Stock			X										X								X										
	Disney Corp			X										X								X										
	Equitas, Trust				X																X											
	Microsoft Grow Stock			X																	X											
	Strong Total Return Fund					X								X		X	X				N	A										P, E
	Strong High Yield Bond Fund					X								X		X	X				N	A										P

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SCHEDULE IV — TRANSACTIONS

Name T. E. Petri

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Strong Total Return Fund	X			IRA Dividend Reinvestment	X									
	Strong Total Return Fund			X	7/26/99			X							
	Strong Growth Fund	X			IRA Dividend Reinvestment	X									
	Janus Worldwide Fund	X			"	X									
	AIM Growth Fund	X			401(k) Annuity Withdrawal	X									
	IVY Int'l Cl B Fund	X			"	X									
	Firstar Corp., Stock		X		4/20/99			X							
	Walgreen, Stock		X		4/20/99			X							
	Firstar Corp, Stock	X			3/15/99	X									
	Firstar Corp, Stock	X			5/11/99	X									
	Firstar Corp, Stock	X			7/26/99	X									
	Firstar Corp, Stock	X			11/4/99	X									
	Overseas Shipholding Group		X		10/12/99		X								
	Berkshire Hathaway, Stock	X			9/22/99			X							
	Lloyd's of London	X			Various		X								
	Lloyd's of London		X		Various		X								

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SCHEDULE IV — TRANSACTIONS

Name T. E. Petri

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10–12–99		X								
	AIRTOUCH, STOCK			X	7/9/99	X									
	AMERITECH, STOCK			X	10/14/99		X								
	AMERITECH, STOCK			X	11/1/99	X									
	AMERICAN ELECTRIC POWER		X		9/15/99		X								
	STRONG HIGH YIELD BOND FUND	X			1st DAILY INVESTMENT	X									

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H $1,000,001 – $5,000,000	I $5,000,001 – $25,000,000	J $25,000,001 – $50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Merrill Lynch	Loan Secured by Stock				X						

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	RAILWAY PROGRESS INST.	4/8-4/9/99	WASH., D.C. - MIAMI, FLA. - D.C.	Y	Y	N	N
	ASSOC. OF AM. RAILROADS	4/10/99	WEST PALM BEACH, FLA. - DC	Y	Y	N	N
	HIGH SPEED GROUND TRANSPORTATION ASSOC.	1/28/99	WASH, D.C. - CHICAGO - WASH, DC	N	N	N	N

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Name	Page 11 of 11
T. E. PETRI	

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
PARTNER	LLOYD'S, UNDERWRITING INSURANCE RISKS, LONDON, ENGLAND
DIRECTOR	SOCIETY INSURANCE (A MUTUAL COMPANY), FOND DU LAC, WISCONSIN

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

3430

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 MAY 15 AM 11:31
(3)
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
HAND DELIVERED
MC
(Office Use Only)

DAVID D. PHELPS
(Full Name)

35 DEWEY ROAD
(Mailing Address)

ELDORADO, IL 62930

Daytime Telephone
(618) 993-2148

Wayne E. Tate, CPA

Filer Status	[X] Member of the U.S. House of Representatives	State ILLINOIS District 19TH	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David D. Phelps	5-11-00

Name DAVID D. PHELPS	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	ELDORADO UNIT #4 SCHOOL DISTRICT	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A	Block B												Block C							Block D											Block E
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E, P
SP, DC, JT	*Examples* SP Mega Corp Stock					X								X						Royalties				X								
	Simon & Schuster			Indefinite																									X			
	1st Bank of Paducah, KY accounts						X									X									X							
JT	C.P. BURNETT & SONS BANKERS			X												X							X									
JT	FARMERS STATE BANK				X											X							X									
SP	PRUDENTIAL INSURANCE			X												X						X										
SP	MBNA AMERICA			X												X						X										
SP	BRANCH BANKING & TRUST				X											X									X							
JT	MOBILE HOME		X												N/A						X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name DAVID D. PHELPS

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
JT	HOUSE 2206 FOURTH STREET				X													N/A			X											
	PHELPS BROTHERS QUARTER																															
	PARTNERSHIP, IL MUSICAL GROUP			X											PARTNERSHIP INCOME									X								
	ILLINOIS STATE RETIREMENT							X										N/A														
SP	TEACHERS' RETIREMENT SYSTEM				X													N/A														
SP	HORACE MANN T.D. ANNUITY			X														N/A				N/A TAX DEFERRED ANNUITY										
SP	AMERICAN FIDELITY T.D. ANNUITY			X														N/A				N/A TAX DEFFERED ANNUITY										

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I

Position	Name of Organization
PARTNER	PHELPS BROTHERS QUARTET

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
PUBLIC RECORD CENTER
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OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

(5)

HAND DELIVERED
(Office Use Only)

Charles W "Chip" Pickering, Jr. (Full Name)

427 Cannon House Building/US House of Representatives (Mailing Address) Daytime Telephone

Washington, DC 20510 202/225-5031

Filer Status	[X] Member of the U S House of Representatives	State: MS District: 3rd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination:	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e g , salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U S.C app. 4, § 104 and 18 U S C §1001)

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Charles W "Chip" Pickering, Jr.	5-15-2000

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP	Examples:	SP	Mega Corp Stock				X								X										X								P
DC			Simon & Schuster		Indefinite																Royalties									X			
JT			1st Bank of Paducah, KY accounts					X									X									X							
	Laurel Federal S&L(MS)			X													X						X										
	Washington Mutual Investors Fund				X										X								X										
DC	The First Bancshares, Inc, Lamar County, MS				X										X								X										
SP	US Treasury BillBoatman's Bank/Memphis, TN					X											X							X									
	3.3 Acres Jones County MS Section 25, Township 10, Range 11				X																Land	X											

For additional assets and unearned income, use next page.

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Charles W. "Chip" Pickering, Jr.

Page 3 of 5

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	CD Bank of Bartlett, Memphis, TN				X											X							X									
DC	Soloman Smith Barney Mutual Fund Ed-IRA			X												X							X									*P
	Wright Patman Cong. Federal Credit Union, WDC			X												X							X									
																				*Gift given by Relative												

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Name Charles W. "Chip" Pickering, JR.

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
DC	Soloman Smith Barney Mutual Fund ED-IRA *Gift Given by Relative	X			10/12/99	X									

This page may be copied if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
	Roycroft Corporation	Aug 6–13	Wash., D C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	Aspen Institute 1999 Bi-Congressional Retreat	Mar 19-21	Wash., DC to Hershey, PN to Wash., DC	Y	Y	Y	N
	CATO	Jul 16-18	Wash., DC to Napa Valley CA to Wash., DC	Y	Y	Y	N
	Am. Crop Protection Association	Sept 24-26	Wash., DC to Sulphar Springs, WV to Wash., DC	Y	Y	Y	N

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HAND DELIVERED

(Office Use Only)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

OWEN BRADFORD PICKETT
(Full Name)

2133 Rayburn House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone: (202) 225-4215

Filer Status	[X] Member of the U.S. House of Representatives	State: VA District: 02	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001).

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Owen B Pickett	5/11/00

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year For rental property or land, provide an address Provide full names of any mutual funds For a self-directed IRA (i.e one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totalling $5,000 or less in personal savings accounts, any financial interests in or income derived from U.S. Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None"	If other than one of the listed categories, specify the type of income by writing a brief description iin this block	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below Dividends, even if reinvested, should be listed as income	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del. 1st Bank of Paducah, KY accounts	$16,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Beverly Enterprises - Mortgage Receivable	$100,001 - $250,000	Interest & Capital Gains	$15,001 - $50,000	
Cranston Lane Assocs. (Business: Ownership, rental, improvement & sale of real estate, Va. Beach, VA)	$250,001 - $500,000	Rent & Interest	$15,001 - $50,000	
Lynnhaven Station Co. (Business: Ownership & rental of commercial offices, Va. Beach, VA)	$500,001 - $1,000,000	Rent & Interest	$15,001 - $50,000	

Name OWEN BRADFO PICKETT | Page 3 of 11

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

	Sherwood Crossing Assocs. (Business: Apartment construction & rental, Richmond, VA)	$15,001 - $50,000	Rent & Interest	$2,501 - $5,000	
	Toll South Assocs. (Business: Ownership, rental improvement & sale of real estate, Va. Beach, VA)	$250,001 - $500,000	Rent	$15,001 - $50,000	
	Caroline County, VA Farms (571 acres plus 328 acres half-interest)	$500,001 - $1,000,000	Rent	$5,001 - $15,000	
	Magnolia Meadows Assocs. (Business: Ownership, rental improvement & sale of real estate, Va. Beach, VA)	$250,001 - $500,000	Rent & Interest	$50,001 - $100,000	
	Acreage, Hanover Co., VA (1/2 int. in 26 acres)	$250,001 - $500,000	N/A	None	
	Sylakama, Inc. (Business: Ownership, rental improvement & sale of real estate, Va. Beach, VA)	$250,001 - $500,000	Rent, Interest & Capital Gains	$100,001 - $1,000,000	
	Amber Farm Corporation (Business: Ownership, rental improvement & sale of real estate, Va. Beach, VA)	$1,001 - $15,000	Rent & Interest	$201 - $1,000	
	Amber Farm Limited Partnership	$100,001 - $250,000	Rent & Interest	$5,001 - $15,000	
	Centt Bank CD	$50,001 - $100,000	Interest	$2,501 - $5,000	
	VA Retirement System	$1,001 - $15,000	Dividends	$2,501 - $5,000	
SP	AT&T	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	Acadia Realty Trust	$1,001 - $15,000	Dividends	$1 - $200	
SP	BB&T Corp.	$1,001 - $15,000	Dividends	$1 - $200	
SP	Bradley Real Estate Inc. Conv. Ser A	$1,001 - $15,000	Dividends	$1,001 - $2,500	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	Capital One Financial Corp.	$50,001 - $100,000	Dividends	$201 - $1,000	
SP	Chase Manhattan Corp.	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	Cenit Bancorp Inc.	$100,001 - $250,000	Dividends	$2,501 - $5,000	
SP	Ethyl Corp.	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	First Union Corp.	$50,001 - $100,000	Dividends	$1,001 - $2,500	
SP	IRT PPTY Co.	$15,001 - $50,000	Dividends	$2,501 - $5,000	
SP	LSI Logic Corp	None	Dividends	None	S
SP	Loral Space & Comm.	$1,001 - $15,000	Dividends	None	
SP	MGI Properties	$1,001 - $15,000	Dividends	$1 - $200	S
SP	Nationwide Health Properties	$250,001 - $500,000	Dividends	$15,001 - $50,000	
SP	Old Kent Financial Corp.	$100,001 - $250,000	Dividends	$201 - $1,000	
SP	Unisys Corp.	$15,001 - $50,000	Dividends	$1 - $200	
SP	UTD Dominion Realty TR	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	Money Market - Merrill Lynch	$15,001 - $50,000	Interest	$1,001 - $2,500	
SP	TowneBank	$15,001 - $50,000	Dividends	None	P
SP	MedTrust	$15,001 - $50,000	Dividends	None	P
SP	Philip Morris	$50,001 - $100,000	Dividends	$1 - $200	P
SP	IRA AT&T	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	IRA Ethyl Corp.	$1,001 - $15,000	Dividends	$1 - $200	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

SP	IRA: General Electric	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	IRA: IRT Property Co.	$1,001 - $15,000	Dividends	$201 - $1,000	
SP	IRA: Nationwide Health PPTY	$50,001 - $100,000	Dividends	$2,501 - $5,000	
SP	IRA: Bradley Real Estate Inc. Conv. Ser A	$1,001 - $15,000	Dividends	$1,001 - $2,500	
SP	IRA: Merrill Lynch Cash Fund	$15,001 - $50,000	Dividends	$201 - $1,000	
SP	IRA: Philip Morris	$15,001 - $50,000	Dividends	None	P
SP	IRA: Pactiv Corp	$1,001 - $15,000	Dividends	None	E
SP	IRA: Tenneco Automotive	$1,001 - $15,000	Dividends	None	E
	Self IRA: AT&T	$15,001 - $50,000	Dividends	$201 - $1,000	
	Self IRA: Acadia Realty Trust	$15,001 - $50,000	Dividends	$1 - $200	
	Self IRA: BRE Properties	None	Dividends	$1 - $200	S
	Self IRA: Bradley Real Estate Inc. Conv. Ser A	None	Dividends	$1 - $200	S
	Self IRA: Chase Manhattan Corp New	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Self IRA: Eastgroup Properties Inc.	None	Dividends	$1 - $200	S
	Self IRA: Ethyl Corp	$50,001 - $100,000	Dividends	$1,001 - $2,500	
	Self IRA: Federal Realty Inv TR	None	Dividends	$1 - $200	S
	Self IRA: First Financial Fund, Inc.	$15,001 - $50,000	Dividends	$1,001 - $2,500	P
	Self IRA: IRT Property Co.	$50,001 - $100,000	Dividends	$2,501 - $5,000	
	Self IRA: MGI Properties	$1,001 - $15,000	Dividends	$201 - $1,000	S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

Self IRA: Nationwide Health PPTY	$50,001 - $100,000	Dividends	$2,501 - $5,000	
Self IRA: Norfolk Southern Corp	$15,001 - $50,000	Dividends	$201 - $1,000	
Self IRA: RMA Gov't Portfolio (Cash/MM)	$15,001 - $50,000	Dividends	$1,001 - $2,500	
Self IRA: Pactiv Corp.	$1,001 - $15,000	Dividends	None	E
Self IRA: Tenneco Automotive Inc.	$1,001 - $15,000	Dividends	None	E
Self IRA: Micron Elecronics Inc.	$15,001 - $50,000	Dividends	None	P
Self IRA: Steris Corp.	$1,001 - $15,000	Dividends	None	P
Self IRA: MedTrust Corp	$15,001 - $50,000	Dividends	$1,001 - $2,500	P
Self IRA: Sunoco Inc.	$15,001 - $50,000	Dividends	$1 - $200	P
Self IRA: Philip Morris	$50,001 - $100,000	Dividends	$1,001 - $2,500	P
Self IRA: Rite Aid Corp.	$1,001 - $15,000	Dividends	None	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	LSI Logic Corp	Sold	02/19/99	$1,001 - $15,000
SP	MGI Properties	Sold	07/30/99; 11/23/99	$15,001 - $50,000
SP	TowneBank	Purchase	07/09/99	$15,001 - $50,000
SP	MedTrust	Purchase	08/13/99	$15,001 - $50,000
SP	Philip Morris	Purchase	09/09/99; 10/06/99, 10/20/99	$50,001 - $100,000
SP	IRA: Philip Morris	Purchase	04/26/99	$15,001 - $50,000
SP	IRA: Tenneco Inc (spin off resulted in Pactiv Corp. and Tenneco Automotive stock)	Purchase	05/20/99	$1,001 - $15,000
	Self IRA: BRE Properties	Sold	06/08/99	$15,001 - $50,000
	Self IRA: Bradley Real Estate Inc. Conv. Ser A	Sold	06/09/99; 09/01/99; 09/02/99	$15,001 - $50,000
	Self IRA: Eastgroup Properties	Sold	06/08/99	$15,001 - $50,000
	Self IRA: Federal Realty Inv TR	Sold	06/08/99	$15,001 - $50,000
	Self IRA: First Financial Fund	Purchase	02/09/99	$1,001 - $15,000
	Self IRA: MGI Properties	Sold	07/30/99; 11/23/99	$15,001 - $50,000
	Self IRA: Tenneco Inc (spin off resulted in Pactiv Corp and Tenneco Automotive Inc. stock)	Purchase	05/20/99	$15,001 - $50,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	Self IRA: Micron Electronics Inc	Purchase	06/08/99	$15,001 - $50,000
	Self IRA: MedTrust Corp	Purchase	08/17/99	$15,001 - $50,000
	Self IRA: Sunoco Inc.	Purchase	08/12/99	$15,001 - $50,000
	Self IRA: Philip Morris	Purchase	09/09/99; 10/19/99	$50,001 - $100,000
	Self IRA: Rite Aid Corp.	Purchase	10/28/99; 11/05/99	$1,001 - $15,000

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor **at any time** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report **revolving charge accounts** only if the balance at the close of preceding calendar year exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.	$100,001 - $250,000
	M/M Plotkin	Farm Mortgage - Caroline Co.	$100,001 - $250,000
	Union Bank & Trust	Farm Mortgage - Caroline Co.	$100,001 - $250,000
	E.D. & C.D. Proffitt - PAID OFF IN 1999	Farm Mortgage - Caroline Co	$50,001 - $100,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342), political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure–Destination–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce Mega Corporation	Mar.2 Aug.6-13	Wash., D.C.-Chicago-Wash., D.C. Wash., D.C.-Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
U.S. Association of Former Members of Congress Congressional Study Group on Germany	Mar. 27-Apr 2, 1999	Wash., DC-Berlin-Kreuth, Germany-D.C.	Y	Y	N	No

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
Officer & Director	Sylakama, Inc.
Partner	Lynnhaven Station Co.
Partner	Toll South Assoc.
Partner	Cranston Lane Assoc.
Partner	Magnolia Meadows Assoc.
Partner	Sherwood Crossing Assoc., LP
Officer & Director	Amber Farm Corporation
Partner	Amber Farm Limited Partnership

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
00 MAY 15 PM 4:59

(3)

HAND DELIVERED
(Office Use Only)

Joseph Russell Pitts
(Full Name)

905 Mitchell Farm Lane
(Mailing Address)

Kennett Square, PA 19348

Daytime Telephone (610) 444-4581

Filer Status	[X] Member of the U S House of Representatives — State PA District 16th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	X	
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**		X
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	X	
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**		X
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**		X
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**		X
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	X	
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	X	
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?		X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Joseph R. Pitts	May 15, 2000

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Name Joseph Russell Pitts	Page 2 of 5

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commonwealth of Pennsylvania	Legislative Pension	$85,670

For payments to charity in lieu of honoraria, use Schedule II.

Name Joseph Russell Pitts

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	Transaction P, S, E
SP	Examples: Mega Corp Stock						X							X										X								P
DC	Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts							X								X										X						
	Peoples Bank of Oxford			X												X						X										
	Comm of PA Deferred Comp (admin by Copeland Companies)				X											N/A							N/A									
	IRA (admin by Putnam Inv.)							X								N/A							N/A									
SP	TIAA/CREF					X																										

For additional assets and unearned income, use next page.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
DeBurght Foundation, Holland	Jan 24-28	Wash.,D.C. - London, UK - Wash.,D.C.	Y	Y	Y	N
The Heritage Foundation	Aug 10-17	Wash.,D.C. - Taiwan - China - Wash.,D.C.	Y	Y	Y	N
American-Egyptian Cooperation FDN * 7 days in Egypt 3 other days travel	Nov 30 - Dec 9	Wash.,D.C. - Cairo, Egypt - Wash.,D.C.	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board Member	County Corrections Gospel Mission
Advisory Board Member	Eastern College Advisory Board
Advisory Board Member	Keystone State Games
Advisory Board Member	Greystone Society
Advisory Board Member	Crosslinks
Advisory Board Member	Congressional Youth Leadership Council
Advisory Board Member	International Health Services Board

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CLERK'S OFFICE CENTER
00 MAY 15 PM 6:09

MC (5)

HAND DELIVERED
(Office Use Only)

Richard William Pombo
(Full Name)

2411 Rayburn HOB
(Mailing Address)

(202) 225-1947
Daytime Telephone

Washington, D.C.

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 11	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Richard Pombo	5/15/2000

3456

Name Richard W. Pombo

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source	Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
SP, DC, JT	SP — Mega Corp Stock	F: $100,001 – $250,000	DIVIDENDS	IV: $1,001 – $2,500	P
Examples:	Simon & Schuster	L: Over $50,000,000	Other Type of Income (Specify: For Example: Partnership Income or Farm Income): Royalties	VIII: $50,001 – $100,000	S
	1st Bank of Paducah, KY accounts	F: $100,001 – $250,000	INTEREST	VI: $5,001 – $15,000	P
	R. Pombo Ranch II	F: $100,001 – $250,000	INTEREST: Partnership	VII: $15,001 – $50,000	

For additional assets and unearned income, use next page.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	Congressional Federal Credit Union	Revolving Charge	x									

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Safari Club Int'l.	1/22-1/24	Wash.,DC-Reno-Wash.,DC	Y	Y	N	N
	Aspen Institute	3/19-3/21	Wash DC-Hershey-Wash DC	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature, and positions listed on Schedule I.

Position	Name of Organization
Partner	R. Pombo Ranch II

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

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UNITED STATES HOUSE OF REPRESENTATIVES

Form A
For use by Members, officers, and employees

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Congressman Earl Pomeroy
(Full Name)

1533 Longworth House Office Building
(Mailing Address)

Washington DC 20515
Daytime Telephone: 202-225-2611

Filer Status	[X] Member of the U S House of Representatives	State ND District: 00	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]	VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [ ]	No [X]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS– Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Earl Pomeroy	5/11/00

Name CONGRESSMAN EARL POMEROY | Page 2 of 5

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year

If you use a valuation method other than fair market value, please specify the method used.

If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A: Asset and/or Income Source		Block B: Value of Asset	Block C: Type of Income	Block D: Amount of Income	Block E: Transaction
			A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT	Examples: SP Mega Corp Stock			DIVIDENDS: X	IV $1,001 – $2,500	P
	Examples: Simon & Schuster		Indefinite	Other Type of Income: Royalties	IX $100,001 – $1,000,000	
	Examples: 1st Bank of Paducah, KY accounts		F $100,001 – $250,000	INTEREST: X	VI $5,001 – $15,000	
	GUARANTEE MUTUAL LIFE CO		C $1,001 – $15,000	INTEREST: X	II $1 – $200	
	VALIC		E $50,001 – $100,000	Other Type of Income: NA	I None: NA	
	TWEEDY, BROWNE (IRA) AMERICAN VALUE FUNDS		D $15,001 – $50,000	Other Type of Income: NA	I None: NA	
	TWEEDY, BROWNE GLOBAL VALUE FUND (IRA)		D $15,001 – $50,000	Other Type of Income: NA	I None: NA	
	PUBLIC EMPLOYEES RET SYS *		D $15,001 – $50,000	Other Type of Income: NA	I None: NA	
SP	BANK CENTER FIRST		C $1,001 – $15,000	INTEREST: X	IV $1,001 – $2,500	

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name CONGRESSMAN EARL POMEROY

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction: P, S, E
SP	VALIC				X															NA	NA											
SP	TWEEDY, BROWNE AMERICAN VALUE FUND (IRA)				X															NA	NA											
SP	TWEEDY, BROWNE GLOBAL VALUE FUND (IRA)			X																NA	NA											
SP	PUBLIC EMPLOYEES RET. SYS*				X															NA	NA											
SP	FIRST AMERICAN FUNDS			X										X			X								X							E

* INVESTED WITH INSTITUTION; INDIVIDUAL HAS NO DISCRETION REGARDING PURCHASES OR SALES OF ASSETS IN ACCOUNTS.

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SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
Example:	Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	First American Funds	Exchange	4/1/99	$1,001 - $15,000

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar 2	Wash., D.C.-Chicago-Wash., D.C.	N	N	N	N
Mega Corporation	Aug 6-13	Wash., D.C.-Los Angeles-Cleveland	Y	Y	Y	4 Days
University of Connecticut Insurance Law Center	4/11-4/12	Bismarck - Hartford - DC	Y	Y	N	None
Aetna International, Inc.	4/19	DC - Hartford - DC	N	N	N	None

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

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HOUSE OF REPRESENTATIVES
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MC (7)
(Office Use Only)

JOHN EDWARD PORTER
(Full Name)
1625 SHERIDAN RD., WILMETTE IL 60091
(Mailing Address)
847-940-0202
Daytime Telephone

Filer Status	[X] Member of the U S House of Representatives	State IL District 10	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1 000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.		5-15-00

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SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	THE HUMAN RIGHTS ALLIANCE	SPOUSE SALARY	

For payments to charity in lieu of honoraria, use Schedule II.

Name JOHN EDWARD PORTER | Page 3 of 7

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B												Block C							Block D											Block E
			A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP, DC, JT	*Examples* SP	Mega Corp. Stock					X								X										X								P
		Simon & Schuster			Indefinite																Royalties								X				
		1st Bank of Paducah, KY accounts						X									X									X							
JT		ALLSTATE CORP. STOCK				X									X									X									
JT		BRISTOL-MYERS SQUIBB, STK				X									X									X									
JT		CENTURY TELEPHONE, STK				X									X								X										
JT		CITIGROUP, INC., STOCK				X									X									X									
JT		COMPUTER ASSOCIATES, STK				X									X								X										
JT		EXXON CORP, STOCK					X								X										X								

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JOHN EDWARD PORTER

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
JT	FOX CORP STOCK	D		I	
JT	NATIONAL CITY CORP STK	D	DIVIDENDS	III	
JT	SEARS ROEBUCK, STOCK	C	DIVIDENDS	III	
JT	3COM CORP STOCK	D		I	
JT	TYCO INT'L LTD NEW STK	D	DIVIDENDS	II	
JT	AMER. POWER CONV. CORP STK	D		I	P
JT	GEN. ELEC. ACCEPTANCE BOND	C	INTEREST	III	
JT	FRANKLIN U.S. GOVT SEC. FUND	E	INTEREST	VI	
JT	FORD MOTOR CREDIT, BOND	A	INTEREST	III	S
JT	RAYMOND JAMES & ASS. ST ACCT.	D	INTEREST	III	
	CONS. FED. CREDIT UNION ACCT.	C	INTEREST	II	
	RAYMOND JAMES & CO., IRA	D		I	P
JT	REAL PROPERTY, FLORIDA	D		I	

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SCHEDULE IV — TRANSACTIONS

Name JOHN EDWARD PORTER | Page 5 of 7

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.			Type of Transaction			Date	Amount of Transaction									
SP, DC, JT	Asset		PURCHASE	SALE	EXCHANGE	(MO/DAY/YR)	B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:*	Mega Corporation Common Stock	X			10–12–99		X								
JT	FORD MOTOR CREDIT CORP. BOND			X		9-15-99	X									
JT	CITIGROUP, INC., COMMON STOCK			X		6-22-99	X									
JT	AMERICAN POWER CONVERSION CORP. COMMON STOCK		X			3-8-99		X								

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
HARVARD UNIVERSITY KENNEDY SCHOOL OF GOV'T	1-21 TO 1-24	WASH D.C. - FT LAUDERDALE, FL - WASH DC	Y	Y	Y	N
ASPEN INSTITUTE	2-12 TO 2-15	WASH D.C. - ST. PETERSBURG, FL - WASH DC	Y	Y	Y	N
AMERICAN MEDICAL ASSN	2-15 TO 2-17	ST PETERSBURG, FL - PALM BEACH, FL	Y	Y	Y	N
THE ASSOCIATION OF ACADEMIC PHYSIATRISTS	2-17 TO 2-19	PALM BEACH, FL - ORLANDO, FL	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I

Position	Name of Organization
CO-CHAIRMAN	CONGRESSIONAL HUMAN RIGHTS CAUCUS
CO-CHAIRMAN	CONGRESSIONAL ARMENIAN ISSUES CAUCUS
CO-CHAIRMAN	CONGRESSIONAL HONG KONG CAUCUS
TRUSTEE	KENNEDY CENTER FOR THE PERFORMING ARTS
BOARD MEMBER	POPULATION RESOURCE CENTER
PRESIDENT	GENERAL SERVICES CORPORATION

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer

Date	Parties To	Terms of Agreement

GPO 2000 62 753 (mac)

Use additional sheets if more space is required.

JOHN EDWARD PORTER
10TH DISTRICT OF ILLINOIS

COMMITTEE ON APPROPRIATIONS
SUBCOMMITTEES
FOREIGN OPERATIONS
LABOR, HEALTH AND HUMAN SERVICES AND EDUCATION
CHAIRMAN
MILITARY CONSTRUCTION
CONGRESSIONAL HUMAN RIGHTS CAUCUS
CO CHAIRMAN

Congress of the United States
House of Representatives
Washington, DC 20515–1310

WASHINGTON OFFICE
2373 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515–1310
(202) 225–4835

HOME OFFICES
102 WILMOT ROAD
SUITE 200
DEERFIELD, IL 60015–5100
(847) 940–0202

301 W. WASHINGTON STREET
WAUKEGAN, IL 60085–4339
(847) 662–0101

May 16, 2000

AC

2

Mr. Jeff Trandahl
The Clerk, U.S. House of Representatives
Legislative Resource Center
B-106 Cannon House Office Building
Washington, DC 20515

Dear Mr. Trandahl:

I am writing to request an amendment to my Financial Disclosure Form that I filed on May 15th. Inadvertently, I omitted a trip that I had taken in January, 1999 that was funded by a private organization.

I have attached a Schedule VII form to this letter to be added to my full Disclosure. If you have any questions, please let me know.

Thank you for your attention to this matter.

Sincerely,

John Edward Porter
Member of Congress

Enclosure

AND DELIVERED

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00 MAY 16 PM 12:54

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash , D C —Chicago—Wash , D C	N	N	N	N
	Roycroft Corporation	Aug 6-13	Wash , D C —Los Angeles– Cleveland	Y	Y	Y	4 Days
	Global Legislators Organization for a Balanced Environment-USA	Jan. 14-18	Wash., D.C –London, England–Wash., D C	Y	Y	Y	N

00 MAY 15 PM 4:47

HAND DELIVERED

(Office Use Only)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

ROBERT J. PORTMAN
(Full Name)

203 MIAMI AVENUE
(Mailing Address)

TERRACE PARK OH 45174

Daytime Telephone: 202-225-3164

Filer Status	[X] Member of the U.S. House of Representatives	State: OH District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X] No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ] No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ] No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X] No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X] No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X] No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X] No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X] No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ] No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U.S.C. app. 4, 104 and 18 U.S.C. 1001)

CERTIFICATION	SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month/Day/Year)
I CERTIFY that the statements I have made on this form, and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Rob Portman	May 15, 2000

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Name ROBERT J. PORTMAN | Page 1 of 1

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Richard Saunders, International, Cincinnati, Ohio	Spouse's Salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e. one where you have the power to select the specific investments), provide information on each asset in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location For additional information, see the instruction booklet for the reporting year. **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S Government retirement programs If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.	at close of reporting year. If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None."	If other than one of the listed categories, specify the type of income by writing a brief description iin this block.	For retirement plans that do not allow you to choose specific investments, you may write "NA" for income For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.	Indicate if asset was purchased(P), sold(S), or exchanged(E) in reporting year.
SP, DC, JT *Examples:* SP Mega Corp. Stock 123 Main St., Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
NUVEEN MUNICIPAL VALUE FUND	$1,001 - $15,000	Interest	$201 - $1,000	
ASHWOOD FARMS, INC. SPRINGBORO, OH (WARREN CO)	$1,001 - $15,000	Dividends	None	
VICTORY GRADISON GOVT RESERVES (formerly GRADISON U.S. GOV'T RESERVES)	$15,001 - $50,000	Dividends	$1,001 - $2,500	E
GOLDEN LAMB TRUST - LAND, BLDG LOCATED ON BROADWAY STREET IN LEBANON, OH	$50,001 - $100,000	Rent	$15,001 - $50,000	

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SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	LEBANON HOUSE INC. - CINCINNATI, OH	$250.001 - $500.000	Dividends	$117,600	
	VICTORY OHIO MUNI BOND FUND CLASS G (formerly GRADISON-MCDONALD OHIO TAX FREE INCOME FUND)	$15.001 - $50.000	Interest	$1.001 - $2.500	P AND E
	VICTORY ESTABLISHED VALUE CLASS G (formerly GRADISON-MCDONALD ESTABLISHED VALUE FUND)	$50.001 - $100.000	Dividends	$5.001 - $15.000	P AND E
	VICTORY SMALL COMPANY OPPORTUNITY FUND CLASS G (formerly GRADISON-MCDONALD OPPORTUNITY VALUE FUND)	$15.001 - $50.000	Dividends	None	S AND E
	PORTMAN EQUIPMENT COMPANY (INCLUDING STOCK HELD IN IRREVOCABLE TRUST WHICH MEMBER IS A BENEFICIARY) - CINCINNATI, OH	$1.000.001 - $5.000.000	Dividends (Loan back to company) *	$151,000	
	* PORTMAN EQUIPMENT COMPANY - NOTE RECEIVABLE	$100.001 - $250.000	Interest	None	P
	MARIEMONT VILLAGE PROPERTIES - LIMITED PARTNERSHIP	$1.001 - $15.000	Capital Gains	$15.001 - $50.000	
	PROCTOR & GAMBLE CO	$1.001 - $15.000	Dividends	$201 - $1.000	P
	SHAKER PROPERTIES LTD - LAND & BUILDING LOCATED ON FUJITEC DRIVE IN LEBANON & SPANGLER ROAD IN FAIRBORN, OHIO	$1.001 - $15.000	Rent	None	
	GRAUSTARK, LLC - LAND & BUILDING LOCATED ON TRIPORT ROAD IN GEORGETOWN, KY	$15.001 - $50.000	Rent	None	

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	GRAYDON HEAD & RITCHEY - RETIREMENT PLAN, CINCINNATI, OH	$50.001 - $100.000	NA	NA	
	VICTORY INTERNATIONAL GROWTH FUND CLASS G (formerly GRADISON-MCDONALD INTERNATIONAL FUND)	$50.001 - $100.000	Dividends	$5.001 - $15.000	P, S, AND E
	PEAVLER PARTNERSHIP - LAND AND BUILDING LOCATED ON ROSSPLAIN ROAD IN CINCINNATI, OHIO AND JAMIKE AVENUE IN ERLANGER, KY	$546,000	Rent	$101,400	
SP	VICTORY GRADISON GOVT RESERVES (formerly GRADISON- MCDONALD US GOVERNMENT RESERVES)	$1.001 - $15.000	Interest	$201 - $1.000	E
SP	IRA, GRADISON-MCDONALD	$15.001 - $50.000	Interest	NA	
SP	NUVEEN FLAGSHIP LTD TERM MUNICIPAL BOND FUND	$15.001 - $50.000	Interest	$1.001 - $2.500	P
SP	NUVEEN MUNICIPAL VALUE FUND	$50.001 - $100.000	Dividends	$2.501 - $5.000	S
SP	CCB FINANCIAL CORPORATION	$15.001 - $50.000	Dividends	$1.001 - $2.500	
SP	AMERICAN EXPRESS CO. NONCALL NOTES	$1.001 - $15.000	Interest	$1 - $200	
DC	FLAG INVESTORS EQUITY A FUND	$50.001 - $100.000	Dividends	$1.001 - $2.500	P
DC	PROCTOR & GAMBLE CO	$50.001 - $100.000	Dividends	$1.001 - $2.500	P
DC	IRREVOCABLE TRUSTS	$250.001 - $500.000	Dividends	$15.001 - $50.000	P AND S

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

	VICTORY DIVERSIFIED STOCK FUND CLASS G (formerly GRADISON-MCDONALD GROWTH & INCOME FUND)	$50,001 - $100,000	Dividends	$5,001 - $15,000	P AND E
	IRA, VICTORY FUND FOR INCOME CLASS G (formerly GRADISON-MCDONALD GOVERNMENT INCOME FUND)	$1,001 - $15,000	Dividends	$201 - $1,000	P AND E
	IRA, VICTORY ESTABLISHED VALUE CLASS G (formerly GRADISON-MCDONALD ESTABLISHED VALUE FUND)	$1,001 - $15,000	Dividends	$201 - $1,000	P AND E
	IRA, VICTORY DIVERSIFIED STOCK FUND CLASS G (formerly GRADISON-MCDONALD GROWTH & INCOME FUND)	$1,001 - $15,000	Dividends	$1,001 - $2,500	P AND E
	IRA, VICTORY INTERNATIONAL GROWTH FUND CLASS G (formerly GRADISON-MCDONALD INTERNATIONAL FUND)	$15,001 - $50,000	Dividends	$1,001 - $2,500	P AND E
	IRA, VICTORY GRADISON GOVT RESERVES (formerly GRADISON-MCDONALD U.S. GOVERNMENT RESERVES)	$1,001 - $15,000	Dividends	$1 - $200	E
SP	COLONIAL SELECT VALUE FUND	$100,001 - $250,000	Dividends	$5,001 - $15,000	P
SP	STATE STREET RESEARCH ALPHA FUND C	$15,001 - $50,000	Dividends	$1,001 - $2,500	P AND S
SP	TEMPLETON FOREIGN SERIES II	$50,001 - $100,000	Dividends	$1,001 - $2,500	P

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
	PROCTOR & GAMBLE CO.	Purchase	QTR DIV REIN	$1,001 - $15,000
	IRA, VICTORY DIVERSIFIED STOCK FUND CLASS G (formerly GRADISON-MCDONALD GROWTH & INCOME FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
SP	COLONIAL SELECT VALUE FUND CLASS A	Purchase	MON DIV REIN	$1,001 - $15,000
SP	STATE STREET RESEARCH ALPHA FUND C	Purchase	MON DIV REIN	$1,001 - $15,000
SP	TEMPLETON FOREIGN SERIES II	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY OHIO MUNI BOND FUND CLASS G (formerly GRADISON-MCDONALD OHIO TAX FREE INCOME)	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY ESTABLISHED VALUE CLASS G (formerly GRADISON-MCDONALD ESTABLISHED VALUE FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY SMALL COMPANY OPPORTUNITY FUND CLASS G (formerly GRADISON-MCDONALD OPPORTUNITY VALUE FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY INTERNATIONAL GROWTH FUND CLASS G (formerly GRADISON-MCDONALD INTERNATIONAL FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY INTERNATIONAL GROWTH FUND CLASS G	Sold	09/30/99, 12/14/99	$15,001 - $50,000
DC	FLAG INVESTORS EQUITY A FUND	Purchase	01/15/99, MON DIV REIN	$1,001 - $15,000
DC	IRREVOCABLE TRUSTS	Purchase	05/03/99, 12/21/99, MON DIV REIN	$100,001 - $250,000
DC	PROCTOR & GAMBLE CO.	Purchase	QTR DIV REIN	$1,001 - $15,000

SCHEDULE IV -- TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP,DC,JT	Asset	Type of Transaction	Date	Amount of Transaction
	Example: Mega Corporation Common Stock	Purchase	10/12/1999	$15,001 - $50,000
SP	STATE STREET RESEARCH ALPHA FUND C	Sold	12/16/99	$15,001 - $50,000
	IRA, VICTORY FUND FOR INCOME CLASS G (formerly GRADISON-MCDONALD GOVERNMENT INCOME FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
	IRA, VICTORY ESTABLISHED VALUE CLASS G (formerly GRADISON-MCDONALD ESTABLISHED VALUE FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY DIVERSIFIED STOCK FUND CLASS G (formerly GRADISON-MCDONALD GROWTH & INCOME FUND)	Purchase	MON DIV REIN	$1,001 - $15,000
	VICTORY SMALL COMPANY OPPORTUNITY FUND CLASS G	Sold	09/30/99, 12/14/99	$15,001 - $50,000
SP	NUVEEN MUNICIPAL VALUE FUND	Sold	12/13/99	$1,001 - $15,000
	PORTMAN EQUIPMENT COMPANY NOTE RECEIVABLE	Purchase	04/99	$100,001 - $250,000

Name ROBERT J. PORTMAN | Page 1 of 1

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. **Exclude:** Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce Mega Corporation	Mar 2 Aug 6-13	Wash., D.C.-Chicago-Wash., D.C. Wash., D.C.-Los Angeles-Cleveland	N Y	N Y	N Y	N 4 Days
ASPEN INSTITUTE For Bipartisan Retreat	MARCH 19-21, 1999	WASHINGTON, DC TO HERSHEY, PA TO WASHINGTON, DC	Y	Y	Y	NONE

Name ROBERT J. PORTMAN | Page 1 of 1

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Organization
TRUSTEE	THE SPRINGER SCHOOL
MEMBER	UNITED WAY & COMMUNITY CHEST GOV'T RELATIONS COMMITTEE
PARTNER	PEAVLER PARTNERSHIP
LIMITED PARTNER	MARIEMONT VILLAGE PROPERTIES
DIRECTOR	COMMUNITY ANTI-DRUG COALITION OF AMERICA (CADCA)
DIRECTOR & PRESIDENT	COALITION FOR A DRUG FREE GREATER CINCINNATI
LLC MEMBER	SHAKER PROPERTIES, LTD
LLC MEMBER	GRAUSTARK LLC

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
CENTER
00 MAY 15 PM 5:37

(6)

David Eugene Price
(Full Name)
2200 N. Lakeshore Dr. Chapel Hill, NC 27514
(Mailing Address)
Daytime Telephone (202) 225-1784

HAND DELIVERED
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives — State NC District 04	[ ] Officer or Employee — Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [ ]	No [X]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	David E. Price	5/15/00

3485

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Westview Press	book royalties	1,405.60
	North Carolinians Against Gun Violence Education Fund	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Mega Corp. Stock					X								X										X								P
DC	Simon & Schuster		Indefinite																	Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X										X						
	Smith Barney Money Market Units					X								X										X								
	NC Eastern Municipal Power Agency Bonds			X												X							X									
	NC Municipal Power Agency # 1 Bonds			X												X							X									
	Duplin Co., NC Municipal Bonds			X												X							X									
	American Precision Industries Stock			X										X							X											
	Cisco Systems Stock				X									X							X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name David E. Price

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Coca Cola Stock				X									X									X									
	Con. Natural Gas Stock			X										X								X										
	Electronic Data Systems Stock			X										X								X										
	Emerson Electric Stock			X										X									X									
	General Electric Stock					X								X									X									
	Gillete Stock			X										X								X										
	Home Depot Stock				X									X								X										
	Intel Corp. Stock				X									X								X										
	Mc Donalds Corp. Stock				X									X								X										
	Minn. Mining + MFG. Stock			X										X									X									
	Motorola Ind. Stock			X										X								X										
	Pepsico Inc. Stock				X									X									X									
	Tricon Global Rest Stock			X										X							X											
	N.W. Mutual Life Insurance Policy			X										X									X									
	TIAA/CREF Retirement Plan								X											retirement plan	X											

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SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Confederation of Indian Industries	Feb. 12-20	Wash., DC - New Delhi - Wash., DC	Y	Y	Y	N
	Aspen Institute	March 19-21	Wash., DC - Hershey, PA - Wash., DC	Y	Y	Y	N
	Democratic Leadership Council	Apr. 30-May 2	Wash., DC - New Orleans - Wash, DC	Y	Y	N	N
	Aspen Institute	Aug. 15-21	Raleigh/Durham - Berlin - Raleigh/Durham	Y	Y	Y	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Consulting Editor	Current Magazine
Advisory Board, Congressional Fellowship Program	American Political Science Association
Board of Advisors	Mars Hill College
Professor on Leave	Duke University

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	Duke University	unpaid leave of absense

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Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
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OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 15 2000
(Office Use Only)

Deborah D. Pryce
(Full Name)

5602 Riverside Drive Dublin, Ohio 43017
(Mailing Address)

(614)469-5614
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State Ohio District 15th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month Day Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Delisa Pryce	5/13/00

3491

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commercial One Realtors, Inc. Columbus, OH	Spouse's Commission	35,399
	Ohio Mutual Insurance Co.	Spouse's Director Fee	7,109
	Charing Road Partnership	Spouse's Mgmt Fee	2,749
	145 E. Rich Street LLC	Spouse's Mgmt Fee	10,337
	United Ohio Insurance Co.	Spouse's Director Fee	4,100

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
XYZ Magazine	Article	Aug. 13, 1999	$500
None			

This page may be copied if more space is required.

Name Deborah D. Pryce

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income
For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction
Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Transaction P, S, E
SP	Mega Corp Stock					X								X										X								P
DC	Simon & Schuster			Indefinite																Royalties									X			
JT	1st Bank of Paducah, KY accounts						X									X									X							
	Congressional Federal Credit Union			X												X							X									
JT	Huntington National Bank		X													X						X										
SP	Huntington National Bank RE Acct			X												X						X										
SP	Fifth Third Bank (IRA Retirement)													See Broker Statement																		
SP	145 E Rich Street LLC				X										X						X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Deborah D. Pryce

Page 5 of 9

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Ohio Bank-Checking			X												X						X										
SP	Ohio Bank-Savings						X									X								X								
	Fifth/Third Bank			X												X						X										
SP	Zoom Ltd 31-6165195 (11.67%)	X														X							X									S
	Bank One 2797/sh @ $32.25			X										X											X							
JT	Merrill Lynch-Steele Tech		X											X								X										
SP	340 E Gay Street Columbus, OH							X							X						X											
	Charing Rd Associates	X													X							X										
SP	Bonded Development Co. Ltd.	X															X									X						S
	5/3 (IRA Retirement)													See Broker Statement																		
	Merrill Lynch (IRA Retirement)													See Broker Statement																		
SP	726 S High Street Columbus, OH						X								X											X						
SP	32-46 W. Kossuth St Cols, OH						X								X											X						
SP	510-512 S 4th St Cols, OH	X													X						X											S
SP	Fore Sum Ltd			X																Ordinary	X											
SP	Charing Rd (Retirement)				X										X							X										
SP	Paine Webber S&P Industrial			X										X								X										
SP	OH Savings Bank-CD			X												X								X								
SP	Merrill Lynch (IRA Retirement)													See Broker Statement																		
	Northwestern Mutual Life			X										X																		
SP	Penn Mutual Life Insurance			X												X																
	Mass Mutual Life Insurance		X											X																		

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SCHEDULE IV — TRANSACTIONS

Name Deborah D. Pryce

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	Bonded Development Co.		X		3-1-99	X			(Partial Sale of Land)						
SP	S & P Industrial 1998 Ser C Select Portfolio		X		5-3-99	X									
SP	510-512 S Fourth Street Columbus, OH		X		12-14-99				X						
SP	Zoom. Ltd.		X		3-1-99		X		(Partial Sale of Land)						

This page may be copied if more space is required.

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
SP	The Ohio Bank	Mtg 726 S High Street Cols OH				X						
SP	The Ohio Bank	Mtg 32-46 W Kossuth Cols OH					X					
JT	The Ohio Bank	Mtg Charing Road Cols OH			X							
SP	The Ohio Bank	Mtg 340 E Gay Street Cols OH					X					
SP	Donna Walker	Personal Note			X							
SP	Karen Walker Kosbab	Personal Note		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination an personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples	Chicago Chamber of Commerce	Mar 2	Wash., D.C —Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C —Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Congressional Program of	2/18-2/22/99	Columbus, OH - San Juan	Y	Y	Y	N
	The Aspen Institute		Puerto Rico - Columbus, OH				

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Trustee of the National Fund for the US Botanical Garden

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1978	State of Ohio Public Employee Retirement Chapter 145.01 Ohio Revised Code	Qualified Retirement Plan to begin at retirement Age 65

GPO 2000 62-753 (mac)

Use additional sheets if more space is required.

Merrill Lynch
Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT #	F/C#	PAGE #	SOCIAL SEC. #
656 92C87	9824	2	294-50-5500

MLPF& S CUST FPO
DEBORAH PRYCE IRA

***** DAILY ACCOUNT ACTIVITY *****

DATE	TRANSACTION	DESCRIPTION	PRICE	AMOUNT
12 21	Divd Reinv	12 ML GLOBAL ALLOCATION A AGENT AS OF 12/15/99 REINV AMOUNT $170.97 REINV PRICE $13.49 QUANTITY BOT 12.6740		
12 21	Divd Reinv	17 ML GLOBAL ALLOCATION A AGENT AS OF 12/15/99 REINV AMOUNT $223.50 REINV PRICE $13.49 QUANTITY BOT 16.5680		
12 21	Fund Delivery	134 ML RETIREMENT RSRVS CL I		
12 21	Subscription	134 ML RETIREMENT RSRVS CL I		$134.00
12 31	CLOSING BALANCE			$.70CR

***** CURRENT PORTFOLIO *****

QUANTITY	INVESTMENT DESCRIPTION	CURRENT PRICE	MARKET VALUE	CURR. YIELD	EST. INCOME
429.5850	MFS EMERGING GROWTH FUND CLASS A	66.590	$28606		
390.5530	ML GLOBAL ALLOCATION A	14.020	$5475	2.97	$163
TOTALS FOR PRICED INVESTMENTS			$34081		$163

MONEY ACCOUNT	OPENING BALANCE AS OF 09/25	CLOSING BALANCE AS OF 12/31	DIVIDENDS/INTEREST THIS STMT.	DIVIDENDS/INTEREST YEAR TO DATE
RETIREMENT RESERVES CL I	$520.25	$608.34	$7.09	$24.48

IN CALCULATING MANDATORY DISTRIBUTIONS, OR FOR THE PURPOSE OF COMPLETING IRS FORM 8606, YOU MUST USE THE VALUE OF YOUR ACCOUNT AS OF 12/31/99. THIS VALUE SHOULD INCLUDE YOUR PRICED PORTFOLIO TOTAL AND THE VALUE OF CERTAIN LIMITED PARTNERSHIPS AND OTHER DIRECT INVESTMENTS, AS WELL AS ANY SECURITIES THAT WE ARE UNABLE TO PRICE - MARKED "UNAVAILABLE". THE "YEAR-END PLAN VALUE" BELOW CONSISTS OF YOUR PRICED PORTFOLIO TOTAL PLUS THE ESTIMATED VALUE OF LIMITED PARTNERSHIPS OR OTHER DIRECT INVESTMENTS REPORTED ON YOUR YEAR-END STATEMENT.

YEAR-END PLAN VALUE AS OF 12/31/99: $34,690.04

FOR IRA, IRRA AND SEP/IRA ACCOUNTS, THE YEAR-END PLAN VALUE REPRESENTS THE VALUATION WE MUST FURNISH TO YOU AND THE INTERNAL REVENUE SERVICE AS PART OF THE IRS FORM 5498 REPORTING REQUIREMENTS.

1999 CUSTODIAL FEES WILL BE COLLECTED FEBRUARY 2000 FOR ROTH OR EDUCATION IRAS SET UP IN THE FIRST QUARTER. CALL YOUR FC WITH QUESTIONS.

-000001906 END OF STATEMENT DECEMBER, 1999

Please advise your Financial Consultant immediately of any discrepancies on your statement or if you contemplate changing your address. When mailing inquiries, please, mention your account number and address all correspondence to the office servicing your account. Please retain this statement for your tax records. See reverse side for explanation of key terms.

CODE 5029R (R4-99)

Merrill Lynch

Merrill Lynch
Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT #	F/C#	PAGE #	SOCIAL SEC. #
656 92C87	9824	1	294-50-5500

STATEMENT PERIOD	EIN NUMBER
09/25/99 TO 12/31/99	00-0000000

FINANCIAL CONSULTANT	ACCOUNT TYPE
PULERI/LEEMAN/CIEHAN (800) 216-1428	IRA

OFFICE SERVING YOUR ACCOUNT
65 E. STATE ST., SUITE 2600
COLUMBUS OH 43215

MLPF& S CUST FPO
DEBORAH PRYCE IRA
FBO DEBORAH PRYCE
5602 RIVERSIDE DR
DUBLIN OH 43017-1547

***** ACCOUNT SUMMARY *****

PRICED PORTFOLIO		DIVIDEND/INTEREST	
AS OF 12/31/99. . . .	$34,690.04	THIS STATEMENT.....	$700.40CR
AS OF 09/24/99. . . .	$26,521.57	THIS YEAR	$857.40CR

***** CONTRIBUTION INFORMATION *****

TAX YEAR 1998	TAX YEAR 1999
$.00	$.00

***** DISTRIBUTION INFORMATION *****

TAX YEAR 1998	TAX YEAR 1999
$.00	$.00

***** MONEY ACCOUNT QUARTERLY DIVIDEND/INTEREST RECAP *****

MONEY ACCOUNT	OCTOBER	NOVEMBER	DECEMBER	CURRENT MONTH'S EFFECTIVE YIELD
RETIREMENT RESERVES CL I	$2.47	$1.96	$2.66	5.45

***** DAILY ACCOUNT ACTIVITY *****

DATE	TRANSACTION	DESCRIPTION	PRICE	AMOUNT
09 25	OPENING BALANCE			$.32CR
11 08	Custodial Fee	1999 CUSTODIAL FEE		$53.04
11 09	Redeemed	53 ML RETIREMENT RSRVS CL I		$53.00CR
11 09	Received	53 ML RETIREMENT RSRVS CL I		
12 20	*Lg Tm Cap Gain	MFS EMERGING GROWTH FUND CLASS A		$134.42CR
12 21	*Dividend	ML GLOBAL ALLOCATION A		$164.42CR
12 21	Fgn Div Tax	ML GLOBAL ALLOCATION A		$3.61
12 21	Reinvestment	ML GLOBAL ALLOCATION A		$160.81
12 21	*Lg Tm Cap Gain	ML GLOBAL ALLOCATION A		$170.97CR
12 21	Reinvestment	ML GLOBAL ALLOCATION A		$170.97
12 21	*Sh Tm Cap Gain	ML GLOBAL ALLOCATION A		$223.50CR
12 21	Reinvestment	ML GLOBAL ALLOCATION A		$223.50
12 21	Divd Reinv	12 ML GLOBAL ALLOCATION A AGENT AS OF 12/15/99 REINV AMOUNT $160.81 REINV PRICE $13.49 QUANTITY BOT 11.9210		

-000001905

DECEMBER, 1999

Please advise your Financial Consultant immediately of any discrepancies on your statement or if you contemplate changing your address. When making inquiries, please, mention your account number and address all correspondence to the office servicing your account. Please retain this statement for your tax records. See reverse side for explanation of key terms.

CODE 5029R (R4-99)

Merrill Lynch

Merrill Lynch
Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT #	F/C#	PAGE #	SOCIAL SEC. #
656 92C87	9824	1	294-50-5500

STATEMENT PERIOD	EIN NUMBER
06/26/99 TO 09/24/99	00-0000000

FINANCIAL CONSULTANT	ACCOUNT TYPE
PULERI/LEEMAN/CIEHAN (800) 216-1428	IRA

OFFICE SERVING YOUR ACCOUNT
65 E. STATE ST., SUITE 2600
COLUMBUS OH 43215

MLPF& S CUST FPO
DEBORAH PRYCE IRA
FBO DEBORAH PRYCE
5602 RIVERSIDE DR
DUBLIN OH 43017-1547

***** ACCOUNT SUMMARY *****

PRICED PORTFOLIO		DIVIDEND/INTEREST	
AS OF 09/24/99. . . .	$26,521.57	THIS STATEMENT.....	$145.86CR
AS OF 06/25/99. . . .	$26,300.32	THIS YEAR	$157.00CR

***** MONEY ACCOUNT QUARTERLY DIVIDEND/INTEREST RECAP *****

MONEY ACCOUNT	JULY	AUGUST	SEPTEMBER	CURRENT MONTH'S EFFECTIVE YIELD
RETIREMENT RESERVES CL I	$2.36	$1.93	$1.96	4.94

***** DAILY ACCOUNT ACTIVITY *****

DATE	TRANSACTION	DESCRIPTION	PRICE	AMOUNT
06 26	OPENING BALANCE			$.32CR
07 16	*Dividend	ML GLOBAL ALLOCATION A		$139.61CR
07 16	Reinvestment	ML GLOBAL ALLOCATION A		$139.61
07 16	Divd Reinv	10 ML GLOBAL ALLOCATION A AGENT AS OF 07/08/99 REINV AMOUNT $139.61 REINV PRICE $14.86 QUANTITY BOT 9.3950		
09 24	CLOSING BALANCE			$.32CR

***** CURRENT PORTFOLIO *****

QUANTITY	INVESTMENT DESCRIPTION	CURRENT PRICE	MARKET VALUE	CURR. YIELD	EST. INCOME
429.5850	MFS EMERGING GROWTH FUND CLASS A	48.670	$20907		
349.3900	ML GLOBAL ALLOCATION A	14.580	$5094	5.30	$270
TOTALS FOR PRICED INVESTMENTS			$26001		$270

MONEY ACCOUNT	OPENING BALANCE AS OF 06/26	CLOSING BALANCE AS OF 09/24	DIVIDENDS/INTEREST THIS STMT.	YEAR TO DATE
RETIREMENT RESERVES CL I	$514.00	$520.25	$6.25	$17.39

YEAR-END PLAN VALUE AS OF 12/31/98: $23,949.18

Please advise your Financial Consultant immediately of any discrepancies on your statement or if you contemplate changing your address. When making inquiries, please, mention your account number and address all correspondence to the office servicing your account. Please retain this statement for your tax records. See reverse side for explanation of key terms.

Merrill Lynch

Merrill Lynch
Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT #	F/C#	PAGE #	SOCIAL SEC. #
656 92C87	9824	2	294-50-5500

MLPF& S CUST FPO
DEBORAH PRYCE IRA

***** IMPORTANT CUSTODIAL FEE INFORMATION *****

YOUR 1999 CUSTODIAL FEE IS SCHEDULED TO BE PAID FROM YOUR RETIREMENT ACCOUNT IN NOVEMBER, 1999.

YOU MAY CHANGE YOUR METHOD OF PAYMENT BY CONTACTING YOUR FINANCIAL CONSULTANT BEFORE OCTOBER 22, 1999. THANK YOU.

WE ARE PLEASED TO INTRODUCE AN ENHANCED NEWSLETTER. PLEASE CHECK THE INSERTS FOR INFORMATION ON RETIREMENT-ACCOUNT FEES.

-000006472 END OF STATEMENT SEPTEMBER, 1999

Please advise your Financial Consultant immediately of any discrepancies on your statement or if you contemplate changing your address. When making inquiries, please, mention your account number and address all correspondence to the office servicing your account. Please retain this statement for your tax records. See reverse side for explanation of key terms.

CODE 5029R (R4-99)

Merrill Lynch

Fifth Third Securities, Inc.
34 Fountain Square Plaza • Cincinnati, Ohio 45202
(513) 744-8888 • (800) 334-0483
Internet Address "Investments.53.com"

Fifth Third Securities is not a bank and securities offered by it are not insured by the FDIC or any other governmental agency, are not deposits or obligations of any bank, are not endorsed or guaranteed by any bank, and are subject to investment risks, including the possible loss of principal

AGB F078 002220 002218 0641261 2000002 0
SELF DIRECTED IRA FBO
DEBORAH D. PRYCE
5602 RIVERSIDE DR.
DUBLIN, OH. 43017

Acct #	Period	Page
45518731	09/30/99 - 12/31/99	1 of 2

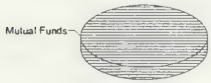
Office #	Rep #	Rep Phone #
AGB	F078	(614) 233-4483

Rep Name
MR STEVEN J TRUITT

WE APPRECIATE YOUR BUSINESS WITH FIFTH THIRD SECURITIES AND LOOK FORWARD TO SERVING YOU IN THE NEW YEAR! YOUR FEEDBACK TO US IN THE ENCLOSED SURVEY WILL HELP US DO AN EVEN BETTER JOB OF SERVING YOUR INVESTMENT NEEDS THANK YOU FOR YOUR COMMENTS!

Account Value Summary

Investment Allocation
December 31, 1999



Description	This Statement	%	Last Statement	%
Mutual Funds	$11,162.28	100	$9,630 49	100
Total Assets	**$11,162.28**	**100**	**$9,630.49**	**100**
Account Value	$11,162.28		$9,630.49	
		Net Change		15.9% Increase

Earnings Summary

Description	This Period	Year-To-Date	Description	This Period	Year-To-Date
Tax Deferred Income					
Dividends	$93 38	$93 38	**Total Income**	**$1,920.23**	**$1,920.23**
Capital Gains Distributions	1,826 85	1,826 85			
Total Tax Deferred Income	**$1,920.23**	**$1,920.23**	**Net Total**	**$1,920.23**	**$1,920.23**

Account Value Detail

Acct Type	Quantity	Description	Symbol	Current Price	Market Value	Est Annual Income	Est Yield
		Mutual Funds					
Cash	627 447	FIFTH THIRD CARDINAL FUND CLASS A	FCFAX	17.790	11,162.28		
		Mutual Funds total market value:			**11,162.28**		
		ACCOUNT VALUE:			**11,162.28**		

Account Activity Summary

Description	This Period	Description	This Period
Debits		**Credits**	
Dividend and Interest Charged	$0 00	Dividend and Interest Income	$1,920 23
Other Debits / Actions Affecting Your Portfolio	1,920.23	Other Credits / Actions Affecting Your Portfolio	0 00
Total	**$1,920.23**	**Total**	**$1,920.23**

Fifth Third Securities, Inc.
34 Fountain Square Plaza • Cincinnati, Ohio 45202
(513) 744-8888 • (800) 334-0483
Internet Address "Investments 53 com"

Fifth Third Securities is not a bank and securities offered by it are not insured by the FDIC or any other governmental agency, are not deposits or obligations of any bank, are not endorsed or guaranteed by any bank, and are subject to investment risks, including the possible loss of principal.

AGB F078 002220 002219 0641261 2000002 0

Acct #	Customer Name	Period	Page
45518731	PRYCE D D	09/30/99 - 12/31/99	2 of 2

Dividends, Interest and Principal

Acct Type	Date	Activity	Quantity	Description	Debit	Credit
Cash	12/01/99	DIVIDEND		FIFTH THIRD CARDINAL FUND CLASS A LTCG DIST R11/26/99 P11/29/99		1,826 85
Cash	12/01/99	DIVIDEND		FIFTH THIRD CARDINAL FUND CLASS A STCG DIV R11/26/99 P11/29/99		93 38

Other Debit and Credit Activity / Actions Affecting Your Portfolio

Acct Type	Date	Activity	Quantity	Description	Debit	Credit
Cash	12/01/99	RECEIVED	5.562	FIFTH THIRD CARDINAL FUND CLASS A DIV REINVST @ 16 790 11/29/99		
Cash	12/01/99	RECEIVED	108.806	FIFTH THIRD CARDINAL FUND CLASS A CPG REINVST @ 16.790 11/29/99		
Cash	12/01/99	REINVEST DIV		FIFTH THIRD CARDINAL FUND CLASS A LTCG DIST R11/26/99 P11/29/99	1,826 85	
Cash	12/01/99	REINVEST DIV		FIFTH THIRD CARDINAL FUND CLASS A STCG DIV R11/26/99 P11/29/99	93 38	

Retirement Account Summary

In accordance with Internal Revenue Service fair market value reporting requirements, the information shown as "Account Value" on Page 1 of this statement represents the December 31, 1999 Fair Market Value for your account. This Fair Market Value information will be furnished to the Internal Revenue Service.

December 31, 1998 Account Value $9,066.11

REMINDER - NO CONTRIBUTIONS HAVE BEEN MADE FOR CURRENT YEAR

End of Statement

MONEY MARKET 7 DAY YIELDS FOR DECEMBER 15, 1999:

5/3 PRIME MONEY MARKET FUND	5.06%
5/3 GOVERNMENT MONEY MARKET FUND	4.80%
5/3 TAX EXEMPT FUND	3.01%
OHIO TAX FREE FUND	2.83%

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AGB F078 002120 002119 0574817 19992740
SELF DIRECTED IRA FBO
DEBORAH D. PRYCE
5602 RIVERSIDE DR.
DUBLIN, OH. 43017

Acct #	Period	Page
45518731	06/30/99 - 09/30/99	1 of 1

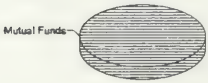
Office #	Rep #	Rep Phone #
AGB	F078	(614) 233-4483

Rep Name
MR STEVEN J TRUITT

MONEY MARKET 7-DAY YIELD FOR SEPTEMBER 16, 1999
5/3 PRIME MONEY MARKET FUND 4 58% 5/3 GOVERNMENT MONEY MARKET FUND 4 37%
5/3 TAX EXEMPT FUND 2 91% OHIO TAX FREE FUND 2 58%

Account Value Summary

Investment Allocation
September 30, 1999



Description	This Statement	%	Last Statement	%
Mutual Funds	$9,630.49	100	$10,138.44	100
Total Assets	**$9,630.49**	**100**	**$10,138.44**	**100**
Account Value	**$9,630.49**		**$10,138.44**	
		Net Change	**-5.0% Decrease**	

Account Value Detail

Acct Type	Quantity	Description	Symbol	Current Price	Market Value	Est Annual Income	Est Yield
		Mutual Funds					
Cash	513.079	FIFTH THIRD CARDINAL FUND CLASS A	FCFAX	18.770	9,630.49		
		Mutual Funds total market value:			**9,630.49**		
		ACCOUNT VALUE:			**9,630.49**		

Retirement Account Summary

December 31, 1998 Account Value $9,066.11

REMINDER - NO CONTRIBUTIONS HAVE BEEN MADE FOR CURRENT YEAR

End of Statement

In accordance with National Association of Securities Dealers, Inc. ("NASD") Conduct Rule 2280, this will serve to advise you as to the existence of the NASD Public Disclosure Program (the "PDP"). The PDP allows investors to learn about the professional background, business practices and conduct of NASD member firms and/or their brokers. To request disclosable information under the PDP, contact the NASD at (800) 289-9999 or through its web site at www.nasdr.com. An investor brochure that describes the PDP is also available through the NASD.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
LEGISLATIVE RESOURCE CENTER
00 JUN 15 PM 5:06 (9)
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES
MC HAND DELIVERED
(Office Use Only)

UPDATED VERSION

Deborah D. Pryce
(Full Name)

5602 Riverside Drive Dublin, Ohio 43017
(Mailing Address)

(614)469-5614
Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives	State: Ohio District: 15th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

A $200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes [X]	No [ ]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes [ ]	No [X]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? If yes, complete and attach Schedule VII.	Yes [X]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes [X]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes [X]	No [ ]	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes [X]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

6/15/00

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EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Deborah Pryce	5/13/00

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples:	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Commercial One Realtors, Inc. Columbus, OH	Spouse's Commission	35,399
	Ohio Mutual Insurance Co.	Spouse's Director Fee	7,109
	Charing Road Partnership	Spouse's Mgmt Fee	2,749
	145 E. Rich Street LLC	Spouse's Mgmt Fee	10,337
	United Ohio Insurance Co.	Spouse's Director Fee	4,100

For payments to charity in lieu of honoraria, use Schedule II.

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Name	Deborah D. Pryce	Page 3 of 9

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1999	$2,000
	XYZ Magazine	Article	Aug. 13, 1999	$500
None				

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Name Deborah D. Pryce

Page 4 of 9

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock				X								X																		P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts					X									X									X							
	Congressional Federal Credit Union				X	X											X							X									
JT	Huntington National Bank				X												X						X										
SP	Huntington National Bank RE Acct				X												X						X										
SP	Fifth Third Bank (IRA Retirement)														See Broker Statement																		
SP	145 E Rich Street LLC					X										X						X											

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

(Continuation Sheet (if needed))

Name Deborah D. Pryce

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
SP	Ohio Bank-Checking			X												X						X										
SP	Ohio Bank-Savings						X									X								X								
	Fifth/Third Bank			X												X						X										
SP	Zoom Ltd 31-6165195 (11.67%)	X														X							X									S
	Bank One 2797/sh @ $32.25			X										X											X							
JT	Merrill Lynch-Steele Tech		X											X								X										
SP	340 E Gay Street Columbus, OH							X							X						X											
	Charing Rd Associates	X													X							X										
SP	Bonded Development Co. Ltd.	X															X								X							S
	S/3 (IRA Retirement)													See Broker Statement																		
	Merrill Lynch (IRA Retirement)													See Broker Statement																		
SP	726 S High Street Columbus, OH						X								X										X							
SP	32-46 W. Kossuth St Cols, OH						X								X										X							
SP	510-512 S 4th St Cols, OH	X													X						X											S
SP	Fore Sun Ltd			X																Ordinary	X											
SP	Charing Rd (Retirement)				X										X							X										
SP	Paine Webber S&P Industrial			X										X								X										
SP	OH Savings Bank-CD			X												X								X								
SP	Merrill Lynch (IRA Retirement)													See Broker Statement																		
	Northwestern Mutual Life			X										X																		
SP	Penn Mutual Life Insurance			X												X																
	Mass Mutual Life Insurance			X										X																		

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Name Deborah D. Pryce | Page 6 of 9

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

S, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H $1,000,001-$5,000,000	I $5,000,001-$25,000,000	J $25,000,001-$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
SP	Bonded Development Co.		X		3-1-99	X			(Partia	Sale of	Land)				
SP	S & P Industrial 1998 Ser C Select Portfolio		X		5-3-99	X									
SP	510-512 S Fourth Street Columbus, OH		X		12-14-99				X						
SP	Zoom. Ltd.		X		3-1-99		X		(Partia	Sale of	Land)				

This page may be copied if more space is required.

Name Deborah D. Pryce | Page 7 of 7

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report *revolving charge accounts* only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability: B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
SP	The Ohio Bank	Mtg 726 S High Street Cols OH				X						
SP	The Ohio Bank	Mtg 32-46 H Kossuth Cols OH					X					
JT	The Ohio Bank	Mtg Charing Road Cols OH			X							
SP	The Ohio Bank	Mtg 340 E Gay Street Cols OH					X					
SP	Donna Walker	Personal Note			X							
SP	Karen Walker Kosbab	Personal Note		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	The Congressional Program of	2/18-2/22/99	Columbus, OH - San Juan	Y	Y	Y	N
	The Aspen Institute		Puerto Rico - Columbus, OH				
	The Ripon Educational	9/14-9/21	Columbus, Ohio - Stockholm, Sweden				
	Fund		Stockholm - Columbus, Ohio Sweden	Y	Y	Y	N

Deborah D. Pryce
6/15/00

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Name	Page
Deborah D. Pryce	9 of 9

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board Member	Trustee of the National Fund for the US Botanical Garden

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
1978	State of Ohio Public Employee Retirement	Qualified Retirement Plan to begin at retirement Age 65
	Chapter 145.01 Ohio Revised Code	

GPO 1989 62-753 (reverse)

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

LEGISLATIVE RESOURCE CENTER
00 MAY -9 PM 3:09

JACK QUINN
(Full Name)
229 CANNON OFFICE BLDG
(Mailing Address)
WASHINGTON DC 20515
Daytime Telephone

HAND DELIVERED
MC (5)
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State N.Y. District 30	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
I Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	[X]	[ ]
II Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	[ ]	[X]
III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	[X]	[ ]
IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	[ ]	[X]
V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	[ ]	[X]
VI Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	[ ]	[X]
VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	[ ]	[X]
VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	[ ]	[X]
IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS--Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	[ ]	[X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	[ ]	[X]

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Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jack Quinn	May 4 2000

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Name JACK QUINN	Page 1 of 4

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	D.L.V. HOSPITAL 55 MELROY ST. LACKAWANNA, NY 14218	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II.

Name JACK QUINN | Page 2 of 4

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None.")

BLOCK C — Type of Income

BLOCK D — Amount of Income (For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.)

BLOCK E — Transaction (Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.)

Block A	Block B	Block C	Block D	Block E
	A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify: For Example: Partnership Income or Farm Income)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
SP, DC, JT — Examples: SP Mega Corp Stock	X; Indefinite	X; Royalties	X	P
SP, DC, JT — Examples: Simon & Schuster	Indefinite	Royalties	X	
SP, DC, JT — Examples: 1st Bank of Paducah, KY accounts	X	INTEREST X	X	
JT KEY BANK - CAMP RD HAMB. 2 C.D ACCOUNTS	X	X	X	
JT MUTUAL FUNDS WASHINGTON MUTUAL INVESTMENTS	X	X	X	
JT PAY ROLL SAVINGS KEY BANK - CAMP RD HAMB	X	X	X	
JT MONSANTO COMPANY - STOCKS	X	X	X	
DC MUTUAL FUNDS (JACK #) WASHINGTON MUTUAL INVESTMENTS	X	X	X	
DC MUTUAL FUNDS (KARA) WASHINGTON MUTUAL INVESTMENTS	X	X	X	

For additional assets and unearned income, use next page.

JACK QUINN
30TH DISTRICT, NEW YORK

TRANSPORTATION AND
INFRASTRUCTURE

SUBCOMMITTEES

AVIATION
GROUND TRANSPORTATION
WATER RESOURCES AND ENVIRONMENT

VETERANS' AFFAIRS

SUBCOMMITTEE CHAIRMAN

BENEFITS

Congress of the United States
House of Representatives
Washington, D.C. 20515-3230

PLEASE RESPOND TO:

WASHINGTON OFFICE
2244 RAYBURN BUILDING
WASHINGTON, DC 20515
(202) 225-3306
FAX (202) 226-0347

MAIN OFFICE
401 MAIN STREET
SUITE 240
BUFFALO, NY 14203-2148
(716) 845-5257
FAX (716) 847-0320

SATELLITE OFFICE:
1490 JEFFERSON AVENUE
BUFFALO, NY 14208
(716) 886-4076

May 5, 2000

Financial Disclosure Addendum

Our family financial situation continues to be affected by Educational Expenses for the fourth year.

College tuition for our son, a senior at Siena College in Albany, New York, was approximately $24,000 in 1999.

Our daughter continues as a senior at Nardin Academy in Buffalo, at an estimated cost of $6,000 in 1999.

We received no financial assistance and expect this situation to continue for the future, as Kara will be attending Georgetown University and Jack III will be attending law school.

Very Truly Yours,

Jack Quinn
Member of Congress

JACK QUINN
30TH DISTRICT, NEW YORK

TRANSPORTATION AND INFRASTRUCTURE

SUBCOMMITTEES

AVIATION
GROUND TRANSPORTATION
WATER RESOURCES AND ENVIRONMENT

VETERANS' AFFAIRS'

SUBCOMMITTEE CHAIRMAN

BENEFITS

Congress of the United States

House of Representatives
Washington, D.C. 20515-3230

PLEASE RESPOND TO:

WASHINGTON OFFICE:
229 CANNON BUILDING
WASHINGTON, DC 20515
(202) 225-3306
FAX: (202) 226-0347

MAIN OFFICE:
403 MAIN STREET
SUITE 240
BUFFALO, NY 14203-2199
(716) 845-5257
FAX: (716) 847-0323

SATELLITE OFFICE:
1490 JEFFERSON AVENUE
BUFFALO, NY 14208
(716) 886-4076

May 5, 2000

I wish to specify that Schedule III, P.2 of my 1999 Financial Disclosure forms to reflect the following:

1. to clarify that:
   - A. The payroll savings account is at the Key Bank in Hamburg, New York, and
   - B. The Washington Mutual Investment asset is one mutual fund.

Thank you very much for your assistance.

Very Truly Yours,

Jack Quinn
Member of Congress

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LEGISLATIVE RESOURCE CENTER
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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

Form A
For use by Members, officers, and employees

George P. Radanovich
(Full Name)

123 Cannon House Office Building
(Mailing Address)

Washington DC 20515

Daytime Telephone 202 225-4540

HAND DELIVERED (6)
(Office Use Only)

A $200 penalty shall be assessed against anyone who files more tha 30 days late.

Filer Status	[X] Member of the U S House of Representatives	State CA District 19	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I Did you or your spouse have "earned" income (e.g. salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.** Yes [X] No [ ]

II Did any individual or organization make a donation to charity in lieu of paying you for a speech, apppearance, or article in the reporting period? **If yes, complete and attach Schedule II.** Yes [ ] No [X]

III Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.** Yes [X] No [ ]

IV Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1 000 in the reporting period? **If yes, complete and attach Schedule IV.** Yes [ ] No [X]

V Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.** Yes [X] No [ ]

VI Did you, your spouse or a dependent child receive any reportable gift in the reporting period (i e., aggregating more than $250 and not otherwise exempt)? **If yes, complete and attach Schedule VI.** Yes [ ] No [X]

VII Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, complete and attach Schedule VII.** Yes [X] No [ ]

VIII Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.** Yes [X] No [ ]

IX Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.** Yes [ ] No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? Yes [ ] No [X]

EXEMPTION Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Yes [ ] No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (See 5 U S C app 4, 104 and 18 U S C 1001)

SIGNATURE OF REPORTING INDIVIDUAL: George P. Radanovich

DATE (Month/Day/Year): 5/10/00

3521

Name George P Radanovich	Page 1 of 1

SCHEDULE I -- EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria, list only the source for other spouse earned income exceeding $1,000.

	Source	Type	Amount
Examples	Keene State	Approved Teaching Fee	$10,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct 2nd)	Spouse Speech	$1,000
	Ontario County Board of Education	Spouse Salary	NA
	Woodward & McDowell - Political Consulting - Palo Alto, CA	Salary of Ethic Weaver (wife)	NA

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE III -- ASSETS AND "UNEARNED" INCOME

BLOCK A **Asset and/or Income Source**	BLOCK B **Value of Asset**	BLOCK C **Type of Income**	BLOCK D **Amount of Income**	BLOCK E **Transaction**
Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting year, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year For rental property or land, provide an address Provide full names of any mutual funds. For an IRA or retirement plan that is *self-directed* provide the required information on each underlying asset that exceeds the value or income reporting threshold For an IRA or retirement plan that is *not* self-directed, name the institution holding the account and provide its value at the end of the reporting year **Exclude:** Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totalling $5,000 or less in personal savings accounts; any financial interests in or income derived from U.S. Government retirement programs. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left For further information, see instructions, pages 14-20	at close of reporting year If you use a valuation method other than fair market value, please specify the method used If an asset was sold and is included only because it generated income, the value should be "None "	If other than one of the listed categories, specify the type of income by writing a brief description in this block.	For IRA's and retirement plans that are *not* self-directed, you may write in "NA" for income	Indicate if asset was purchased(P) sold(S), or exchanged(E) in reporting year
SP, DC, JT *Examples* SP Mega Corp Stock 123 Main St , Dover, Del 1st Bank of Paducah, KY accounts	$15,001 - $50,000 $250,001 - $500,000 $50,001 - $100,000	Dividends Rent Interest	$201 - $1,000 $1,001 - $2,500 $5,001 - $15,000	P
Stock in Radanovich Winery, Inc	$100,001 - $250,000	None	None	NA
Property 3891 Ben Hur Road	$100,001 - $250,000	None	None	NA

3523

SCHEDULE V -- LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child Mark the highest amount owed during the year

Exclude: Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse Report ***revolving charge accounts*** only if the balance at the end of the reporting period exceeded $10,000

SP,DC,JT	Creditor	Type of Liability	Amount of Liability
Example	First Bank of Wilmington, Delaware	Mortgage on 123 Main St , Dover, Del	$100,001 - $250,000
	Congressional Credit Union	Signiture Loan	$10,001 - $15,000
	Louise Hudson, Mariposa CA	1st Trust Deed 3891 Ben Hur Road	$50,001 - $100,000
	Charlie Sihota, Tulare, Ca	2nd Trust Deed 3891 Ben Hur Road	$15,001 - $50,000

Name George P Radanovich | Page 1 of 1

SCHEDULE VII -- TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $250 received by you, your spouse, or a dependent child during the reporting period Indicate whether a family member accompanied the traveler at the sponsor's expense and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor
Exclude: Travel-related expenses provided by federal, state and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U S C 7342), travel paid for by a Federal political committee, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	Point of Departure--Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any timenot at sponsor's expense
Examples Chicago Chamber of Commerce	Mar 2	Wash , D C -Chicago Wash , D C	N	N	N	N
Mega Corporation	Aug 6-13	Wash , D C -Los Angeles-Cleveland	Y	Y	Y	4 Days
Rochester Institute of Technology	May 26 - June 1	DC-Croatia	Y	Y	Y	none
Forest County Schools Coalition	March 7	SF-Reno-SF	N	N	N	none
Wine Institute Board of Directors	Nov 29-30	SF-Orange -SF	Y	Y	N	None

Name George P Radanovich	Page 1 of 1

SCHEDULE VIII -- POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States

Exclude: Positions held in any religious, social, fraternal or political entities; positions solely of an honorary nature, and positions listed on Schedule I

Position	Organization
President (uncompensated)	Radanovich Winery, Inc

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 15 PM 4:20

HAND DELIVERED
(Office Use Only)

Nick Joe Rahall, II
(Full Name)

1801 Harper Road
(Mailing Address)

Beckley, WV 25801

Daytime Telephone (202) 225-3452

Filer Status	[X] Member of the U.S. House of Representatives — State WV District 3rd	[ ] Officer or Employee — Employing Office	**A *$200 penalty* shall be assessed against anyone who files more than 30 days late.**
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [X]	No [ ]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [X]	No [ ]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [X]	No [ ]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I **CERTIFY** that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Nick Joe Rahall, II	5/15/00

3527

SCHEDULE I — EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding $1,000.

Source	Type	Amount
Examples: Keene State	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Ontario County Board of Education	Spouse Salary	NA
WINJ Radio Station, WV Broadcasting, Inc.	Bonus and Non-Employee Comp.	4,200

For payments to charity in lieu of honoraria, use Schedule II.

SCHEDULE II — PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in each Member's filing package.

Source	Activity	Date	Amount
Examples Association of American Associations Wash , D C	Speech	Feb 2, 1999	$2,000
XYZ Magazine	Article	Aug 13, 1999	$500

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits totaling $5,000 or less in personal savings accounts, any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset (at close of reporting year)

If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Asset and/or Income Source	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify. For Example Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E
SP, DC, JT	*Examples*																															
SP	Mega Corp. Stock					X								X																		P, S, E
	Simon & Schuster				Indefinite															Royalties									X			P
	1st Bank of Paducah KY accounts						X									X									X							
JT	EGR Industries, Inc. – Investment Bldg & Land – Harper Road Co-Mac, Cellular One, Beckley, WV and Condo in South Carolina – ½ with brother							X							X											X						

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset: A None	B $1 - $1,000	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	I $1,000,001 - $5,000,000	J $5,000,001 - $25,000,000	K $25,000,001 - $50,000,000	L Over $50,000,000	BLOCK C Type of Income: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	BLOCK D Amount of Income: I None	II $1 - $200	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	X $1,000,001 - $5,000,000	XI Over $5,000,000	BLOCK E Transaction P, S, E
	WV Broadcasting WINJ -			X											X												X					
	P. O. Box 1127																															
	Beckley, WV 25802-1127																															
	Equipment Lease																															
JT	Hernando Co. FL; Land with				X																X											
	brother, cousins and																															
	friends - Approximately																															
	250 Acres																															
JT	H. L. & R. Corp. - Raleigh							X						X		X											X					
	County, WV Land and																															
	money market - ½ with																															
	brother																															
	Rahall Realty - Beckley,			X										X							X											
	WV (12½%)																															
	Bank of Northern, VA	X														X						X										
	Checking Account																															
	(Acct. Closed 3/99)																															

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Hilton Head SC Time - Share Property - two week peak season	C		I	
	WV Broadcasting stock	G		I	
	First Union Securities (Formerly Wheat First) Account - See Attachment 1	H	DIVIDENDS; INTEREST; CAPITAL GAINS	VII	Attach. 18
	Salomon Smith Barney Account - See Attachment 2	I	DIVIDENDS; INTEREST; CAPITAL GAINS	VII	Attach. 2 P.6
	Dean Witter Reynolds Access #1 Acct. See Attachments 3 and 4	F	DIVIDENDS; INTEREST; CAPITAL GAINS	VII	Attach. 19
	Dean Witter Reynolds Access #2 Acct. See Attachmentm 5 and 6	F	DIVIDENDS; INTEREST; CAPITAL GAINS	VII	Attach. 20

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income	BLOCK E Transaction
		A None; B $1 – $1,000; C $1,001 – $15,000; D $15,001 – $50,000; E $50,001 – $100,000; F $100,001 – $250,000; G $250,001 – $500,000; H $500,001 – $1,000,000; I $1,000,001 – $5,000,000; J $5,000,001 – $25,000,000; K $25,000,001 – $50,000,000; L Over $50,000,000	DIVIDENDS; RENT; INTEREST; CAPITAL GAINS; EXCEPTED TRUST; QUALIFIED BLIND TRUST; Other Type of Income (Specify)	I None; II $1 – $200; III $201 – $1,000; IV $1,001 – $2,500; V $2,501 – $5,000; VI $5,001 – $15,000; VII $15,001 – $50,000; VIII $50,001 – $100,000; IX $100,001 – $1,000,000; X $1,000,001 – $5,000,000; XI Over $5,000,000	P, S, E
	Dean Witter Reynolds Access #3 Acct. See Attachments 7 and 8	E	DIVIDENDS, INTEREST, CAPITAL GAINS	VI	Attach. 21
	Dean Witter Reynolds IRA Account. See Attachment 9	D	DIVIDENDS, INTEREST, CAPITAL GAINS	V	Attach. 26
	Barington Capital Account See Attachment 10	B	DIVIDENDS	II	
	Congressional Fed Credit Union Account	B	INTEREST	II	
DC	N. J. Rahall, III - son - Wheat First Account (Attachment 13) and Smith Barney Account (Attachment 14)	H	DIVIDENDS, INTEREST, CAPITAL GAINS	VIII	Attach. 22 and 23
DC	Suzanne Rahall - daughter - Wheat First Account (Attachment 15)	E	DIVIDENDS, INTEREST, CAPITAL GAINS	VI	Attach. 24

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
DC	N. J. Rahall, III - City National Bank, WV (Formerly Bank of Raleigh) Savings Account and Certificates of Deposit				X											X								X								
DC	N. J. Rahall, III - Bank of Northern VA Certificate of Deposit	X														X					X											E
DC	N. J. Rahall, III - United National Bank, WV - Savings Account				X											X							X									
DC	Suzanne Rahall - U.S. Senate Credit Union Savings Account		X													X						X										
DC	N. J. Rahall, III - U.S. Senate Credit Union Savings Account		X													X						X										

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	One Valley Bank, Oak Hill, WV - Checking Account			X												X							X								
	.1712% Interest Qualified Housing Partners Limited Partnership			X																Partnership	X										
	.0396% Interest Scottsdale Land Trust L.P.			X																Partnership					X						
	3.88% Interest Oxford - Columbia Associates L.P.			X																Partnership	X										
	5.38% Interest SNI Development Company Partnership				X															Partnership						X					
	2.80% Interest Cambridge Heights Apartments Partnership			X																Partnership				X							

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	.006449% Interest SB Partners Limited Partnership		X																	Partnership	X											
	Wheat First Securities SEP IRA – Attachment 16					X								X		X	X								X							Attach. 16
	.126664% Interest Chesapeak L.P.				X															Partnership	X											
	.0966% Portfolio Strategy Fund Partnership – Attachment 11						X													Partnership	X											
	Dean Witter Reynolds Account #642 115916 Attachments 11 & 12			X										X		X	X									X						Attach. 25
	Buckman, Buckman & Reid Account (Formerly Mercer, Bokert, Buckman & Reid) Attachment 17		X											X			X					X										Attach. 27

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SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Nick Joe Rahall, II

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset											BLOCK C Type of Income						BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	First Union National Bank Checking Account			X																	X										
	1301 Delaware Ave. SW #409 N, Washington, D.C. (Acquired in 1985 - Began renting in 1999)					X									X									X							

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SCHEDULE IV — TRANSACTIONS

Name Nick Joe Rahall, II

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
	Wheat First Securities Account - Attachment 18	X	X		See Attached					X					
	Salomon Smith Barney Account - Attachment 2-P.6		X		5/22/99	X									
	Dean Witter Reynolds Access #1 Acct. Attachment 19	X	X		See Attached					X					
	Dean Witter Reynolds Access #2 Acct. Attachment 20	X	X		See Attached		X								
	Dean Witter Reynolds Access #3 Acct. Attachment 21	X	X		See Attached					X					
DC	N. J. Rahall, III - Wheat First Securities Acct. - Attachment 22	X	X		See Attached				X						

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SCHEDULE IV — TRANSACTIONS

Name Nick Joe Rahall, II

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example:* Mega Corporation Common Stock	X			10-12-99		X								
DC	N. J. Rahall, III - Smith Barney Acct.		X		See Attached	X									
	Attachment 23														
DC	Suzanne Rahall - Wheat First Securities Acct.	X	X		See Attached			X							
	Attachment 24														
	Dean Witter Reynolds - Acct. #642 115916	X	X		See Attached		X								
	Attachment 25														
	Dean Witter Reynolds IRA Acct.- Attachment 26	X	X		See Attached				X						
	Buckman, Buckman & Reid Account - Attachment 27	X	X		See Attached				X						
	Wheat First Securities SEP IRA:	X			Various	X									
	Colonial TR III & MFS Series TR I														

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SCHEDULE IV — TRANSACTIONS

Name Nick Joe Rahall, II

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out.

SP, DC, JT	Asset	Type of Transaction: PURCHASE	SALE	EXCHANGE	Date (MO/DAY/YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
SP	*Example* Mega Corporation Common Stock	X			10-12-99		X								
DC	N. J. Rahall, III - Bank of Northern VA			X	1/99	X									
	Certificate of Deposit Cashed														

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
Example:	First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del				X						
	MBNA America (Acct. 749 94412)	Cash Advances & Credit Charges		X								
	Citibank Mastercard	Cash Advances & Credit Charges		X								
	MBNA America (Acct. 4264 2904)	Cash Advances & Credit Charges		X								
	American Express Optima	Cash Advances & Credit Charges		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
Examples: Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
National Motor Freight Traffic Association	6/11-14/99	Wash. DC to Myrtle Beach, SC to Washington, DC	Y	Y	N	N
National Motor Freight Traffic Association	7/30-8/2/99	Wash. DC to Boston, MA to Wash. DC	Y	Y	N	N
CSX Corporation	9/4-6/99	Beckley, WV to White Sulphur Springs, WV to Washington, DC no travel expenses accepted	Y	N	N	N
Arab American Institute	11/6-7/99	Wash. DC to Detroit, MI to Wash. DC	Y	Y	N	N
CSX Corporation	12/3/99	Wash. DC to Huntington, WV	N	Y	N	N

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SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
President	WINJ WV Broadcasting Corporation
Vice President & Secretary	H. L. & R. Corporation
Vice President & Secretary	E G R Industries, Inc.
Member	Professional Advisory Board of ALSAC/ St. Jude's Children's Research Hospital
Member	American Task Force for Lebanon Board of Directors

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

GPO 2000 62-753 (misc)

Use additional sheets if more space is required.

FIRST UNION Securities

[redacted]

Attachment 1 – p.1
Duplicate For The Account Of:
NICK JOE RAHALL II

Capital Resource Account

Mail To: 48766 1- 5 99614 RLJ
MR NICK JOE RAHALL II
106 MAIN ST
BECKLEY WV 25801-4611

Account Number
BK08 6539-9650

~~December 1, 1999~~ - December 31, 1999
Page 1 of 4

Investment Objective
TRADING, SPECULATION
OR HIGH INCOME
Your Financial Advisor
EDWARD G RAHALL

122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802

304-252-6221

Tax I.D. No.
236-78-8645

OUR CHIEF INVESTMENT STRATEGIST, RAO CHALASANI, HAS PUBLISHED HIS OUTLOOK FOR OPPORTUNITIES IN THE YEAR 2000. READ INVESTOR'S SPECTRUM--THEN TALK WITH YOUR FINANCIAL ADVISOR.

FIRST UNION SECURITIES, INC. (FUSI) IS A NON-BANK SUBSIDIARY OF FIRST UNION CORPORATION. INVESTMENTS OBTAINED THROUGH FUSI ARE NOT FDIC INSURED, UNLESS OTHERWISE STATED, ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF FUSI OR ANY BANK, ARE NOT GUARANTEED BY FUSI OR ANY BANK, AND ARE SUBJECT TO INVESTMENT RISK, INCLUDING THE POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.

Portfolio Summary

	ENDING BALANCE		BEGINNING BALANCE	
COMPOSITION	MARKET VALUE	PERCENT OF PORTFOLIO	MARKET VALUE	PERCENT OF PORTFOLIO
CASH AND MONEY MARKET	415,783.02	66.6	417,683.10	67.2
BONDS	170,315.50	27.3	170,281.65	27.4
STOCKS	37,839.84	6.1	33,438.94	5.4
TOTAL ESTIMATED PORTFOLIO VALUE	623,938.36	100.0	621,403.69	100.0

Income Summary

DESCRIPTION	THIS PERIOD	YEAR TO DATE
MONEY MARKET FUND DIVIDENDS	2,484.25	14,973.28
TAX EXEMPT INTEREST	.00	5,087.50
TOTAL INCOME	2,484.25	20,060.78

---CONTINUED ON NEXT PAGE---

48766 001-003 00118 99614 RLJ

FIRST UNION Securities

3545

Client Statement

1 - p.2

Duplicate For The Account Of:
NICK JOE RAHALL II

Account Number
BK08 6539-9650

December 1, 1999 - December 31, 1999
Page 2 of 4

Current Portfolio

TYPE/DESCRIPTION	SYMBOL	QUANTITY	CURRENT PRICE	ESTIMATED VALUE	ESTIMATED ANNUAL INCOME	CURRENT YIELD
Cash and Money Market						
CASH		9,172.74		9,172.74	0	0.0
EVERGREEN CRT MONEY MARKET PORTFOLIO 4.86% AVERAGE YIELD 11/16/99-12/31/99		406,610.28	1.0000	406,610.28	19,761	4.8
TOTAL CASH AND MONEY MARKET				415,783.02	19,761	N/A
Bonds						
NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 03/02/88 CALL 01/29/00 @ 99.363		30,000	96.5510	28,965.30	0	0.0
BERKELEY CNTY W VA BLDG COMM HOSP REV CITY HOSP PROJ RFDG OY=6.1% CPN 6.000% DUE 11/01/01 DTD 09/15/92 FC 05/01/93 ACCRUED INT 250.00		25,000	99.8890	24,972.25	1,500	6.0
WEST VIRGINIA ST BLDG COMMN LEASE REV SUB WVA REG JAIL C AMBAC OY=4.20 CPN 4.200% DUE 07/01/03 DTD 08/01/98 FC 01/01/99 ACCRUED INT 525.00		25,000	97.6390	24,409.75	1,050	4.3
WEST VA PARKWAYS, ECON DEV & TOURISM AUTH PKWY REV SER 1989 OY-7.15% CPN 0.000% DUE 07/01/04 DTD 11/07/89		15,000	79.4150	11,912.25	0	0.0
TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 05/01/82		30,000	69.1860	20,755.80	0	0.0
WEST VA ECON DEV AUTH RESIDNTL CARE FAC REV BD (EDGEWOOD SUMMIT) SER 93 CPN 6.500% DUE 11/01/13 DTD 10/15/93 FC 05/01/94 CALL 11/01/03 @ 102.000 ACCRUED INT 270.75		25,000	90.5810	22,645.25	1,625	7.1
KANAWHA PUTNAM CNTY HUNTINGTON CHARLESTON WV S/F MTG 84A OY=11.5% CPN 0.000% DUE 12/01/16 DTD 09/19/84		75,000	35.2020	26,401.50	0	0.0

---CONTINUED ON NEXT PAGE---

Account Number
BK08 6539-9650

Duplicate
December 1, 1999 - December 31, 1999
Page 3 of 4

Current Portfolio continued

TYPE/DESCRIPTION	SYMBOL	QUANTITY	CURRENT PRICE	ESTIMATED VALUE	ESTIMATED ANNUAL INCOME	CURRENT YIELD
Bonds						
PUERTO RICO ELEC PWR AUTH PWR REV SERIES O OY-7.05% CPN 0.000% DUE 07/01/17 DTD 08/24/89		30,000	34.1780	10,253.40	0	0.0
$1,045 IS THE TOTAL ESTIMATED ACCRUED INTEREST AS DETAILED ABOVE.						
TOTAL BONDS				170,315.50	4,175	2.5
Stocks						
AT HOME CORP SER A	ATHM	200	42.8750	8,575.00	0	0.0
CHESAPEAKE L P (A MANAGED FUTURES FUND)		251.7623	116.2400	29,264.84	0	0.0
TOTAL STOCKS				37,839.84	0	0.0
TOTAL ESTIMATED PORTFOLIO VALUE				623,938.36	23,936	3.8

Activity Summary

	ADDITIONS	SUBTRACTIONS	NET AMOUNT
BEGINNING CASH AND MONEY MARKET			417,683.10
DIVIDENDS AND INTEREST	2,484.25	.00	2,484.25
SECURITY SALES	31,527.40	.00	31,527.40
SECURITY PURCHASES	.00	36,911.73	-36,911.73
CASH DEPOSITS AND WITHDRAWALS	6,000.00	5,000.00	1,000.00
TOTALS	40,011.65	41,911.73	-1,900.08
ENDING CASH AND MONEY MARKET			415,783.02

Account Activity

DATE	TRANSACTION	QUANTITY	DESCRIPTION	TRANSACTION PRICE	AMOUNT
Dividends and Interest					
12 31	DIVIDEND		EVERGREEN CRT MONEY MARKET PORTFOLIO 123199 404,126		2,484.25
TOTAL DIVIDENDS AND INTEREST					2,484.25
Security Sales, Purchases, Redemptions					
12 09	PURCHASE	300	XM SATELLITE RADIO HOLDINGS	24.7500	-7,597.95
12 14	SALE	-300	XM SATELLITE RADIO HOLDINGS	28.5000	8,357.56
12 15	PURCHASE	100	AT HOME CORP SER A	50.7500	-5,172.10

---CONTINUED ON NEXT PAGE---

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

REP	ACCOUNT	PAGE
BK08	6539-9650	1 OF 5
TAXPAYER ID: 236-78-8645		

FOR QUESTIONS CALL:
(304)252-6221
EDWARD G RAHALL
122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802

NICK JOE RAHALL II
216 1/2 MAIN ST
BECKLEY WV 25801-4613

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.
ISSUE DATE: 01/19/00

DIVIDENDS AND DISTRIBUTIONS

DESCRIPTION			ACTIVITY	AMOUNT	IRS@BOX	COUNTRY
EVERGREEN CRT MONEY	*	(1)	DIVIDEND	$15,681.15	1	

IRS BOX	1099-DIV -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-DIV, OMB NO. 1545-0110	
1.	ORDINARY DIVIDENDS	$15,681.15
2A.	TOTAL CAPITAL GAINS DISTRIBUTIONS	$0.00
2B.	28 % RATE GAIN	$0.00
2C.	UNRECAP 1250 GAIN	$0.00
2D.	SECTION 1202 GAIN	$0.00
3.	NONTAXABLE DISTRIBUTIONS	$0.00
4.	FEDERAL INCOME TAX WITHHELD	$0.00
5.	INVESTMENT EXPENSES	$0.00
6.	FOREIGN TAX PAID	$0.00
8.	LIQUIDATION DISTRIBUTIONS	$0.00

(1) INCLUDES A SERVICE FEE OF $707.87 THAT MAY BE DEDUCTIBLE

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II	REP ACCOUNT	PAGE
216 1/2 MAIN ST	BK08 6539-9650	4 OF 5
BECKLEY WV 25801-4613	TAXPAYER ID: 236-78-8645	

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

ISSUE DATE: 01/19/00

THIS SECTION LISTS MISCELLANEOUS INFORMATION WHICH CAN BE HELPFUL IN THE PREPARATION OF YOUR TAX RETURN. IT LISTS NON FEDERALLY REPORTABLE INCOME WHICH MAY OR MAY NOT BE TAXABLE AT THE STATE OR LOCAL LEVEL. PLEASE REVIEW THIS INFORMATION WITH YOUR TAX ADVISOR.

DESCRIPTION	ACTIVITY	AMOUNT	REF@#
BERKELEY CO WV BLDG 6%01	INTEREST	$1,500.00	2
KANAWHA PUTNAM CO 0%16	OID LONG TERM	$1,197.43	2
NC ED DUKE UNIV CAB 0%00	OID LONG TERM	$1,864.76	2
PR ELEC PWR 0.00%17	OID LONG TERM	$3.38	2
RICHLAND SC HOSP 0%12	OID LONG TERM	$418.48	2
TAMPA FL 0.00%05	OID LONG TERM	$1,172.05	2
WV ECON EDGEWOOD 6.50%13	INTEREST	$1,625.00	2
W VA ECON EDGEWOOD 5%99	INTEREST	$1,000.00	2
WEST VIRGINIA ST 4.20%03	INTEREST	$962.50	2
WVA PKWYS AUTH 0.00%04	OID LONG TERM	$741.75	2
TOTAL TAX EXEMPT MUNI BOND INTEREST		$10,485.35	

REF # -- TOTALS FOR TAX YEAR 1999
MISCELLANEOUS INFORMATION TOTALS

1. MARGIN DEBIT INTEREST	$0.00DR
2. FEDERALLY TAX EXEMPT MUNICIPAL BONDS	$10,485.35
3. FEDERALLY TAX EXEMPT DIVIDENDS	$0.00
4. NOT USED AT THIS TIME.....	$0.00
5. INCOME SUBJECT TO ALTERNATIVE MINIMUM TAX	$0.00
6. FEDERALLY TAX EXEMPT INTEREST	$0.00
7. FEDERALLY TAX EXEMPT ACCRUED INTEREST	$0.00
8. MASTER LIMITED PARTNERSHIP DISTRIBUTIONS.....	$0.00
9. ACCRUED INTEREST ON PURCHASES.....	$0.00DR

Attachment 2 - p.1

SALOMON SMITH BARNEY

A member of citigroup

Ref: 00006430 00032298

Select Client Statement

December 1 - December 31, 1999

685L99291025030000006430/P 299365AE01 IPFOL914A
CONGRESSMAN NICK JOE RAHALL II
2269 RAYBURN BUILDING
WASHINGTON DC 20515-0005

SALOMON SMITH BARNEY INC.
Your Financial Consultant

JAMES A JOSEPH/PETER JOSEPH
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
570-421-3100

Select Service Center: 1-800-423-7248
Branch: 800-445-2291

Account number 685-03503-12 291

Copies of this statement have also been sent to:

ALAN BLAKE
CONGRESSMAN NICK JOE RAHALL II

Copy for the account of CONGRESSMAN NICK JOE RAHALL II SAM ACCOUNT
218 1/2 MAIN STREET BECKLEY WV

Account value

	Last period	This period	%
Cash balance	$ 0.00	$ 300.00	01
Money funds	36,707.28	37,880.88	1.68
Accrued money fund dividends	50.23	17.42	
Common stocks & options	2,019,578.55	2,221,527.10	98.31
Direct investments		(see Portfolio details)	
Net value	$ 2,056,338.06	$ 2,259,725.38	100

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 3,224.80	$ 16,038.96	$ 0.00
Money funds earnings	144.24	0.00	994.92
Total	$ 3,369.04	$ 16,038.96	$ 994.92

Additional summary information

	This period	This year
Other income	$ 0.00	$ 045.80

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 3,045.86 LT $ 0.00 ST
Unrealized gain or (loss)	1,790,309.30	Not applicable

SALOMON SMITH BARNEY
A member of citigroup

Ref: 00006430 00032299

Select Client Statement
December 1 - December 31, 1999

CONGRESSMAN NICK JOE RAHALL II Account number 685-03583-12 291

Cash and money funds balance

	This period	This year
Opening balance	**$ 38,707.28**	
Deposits	0.00	10,000.00
Withdrawals	-1,895.46	-30,143.12
Dividends credited	3,224.80	
Money funds earnings reinvested	144.24	
Closing balance	**$ 38,180.86**	

Portfolio summary

	This period	Year-to-date
Opening value of securities	2,056,338.06	1,721,488.23
+ Opening cash balance	0.00	240.00
= Opening portfolio balance	2,056,338.06	1,721,728.23
Securities deposited/withdrawn net	0.00	0.00
Capital deposited/withdrawn net	-1,895.46	-30,143.12
Adjusted opening value	2,054,440.60	1,701,585.11
Closing value of securities	2,259,425.38	2,259,425.38
+ Closing cash balance	300.00	300.00
= Closing portfolio value	2,259,725.38	2,259,725.38

Note: Securities deposited/withdrawn net = The value of securities on the day they were debited from or credited to the account as reflected in the "Other security activity" section.
Capital deposited/withdrawn net = Cash withdrawals and deposits, credit card payments, FMA Card activity, checks written, and Money funds/Insured Deposit Account℠ transfers.

Portfolio details

The values of your holdings are as of 12/31/99. Please note, unrealized gain/(loss) is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Money funds

Number of shares	Description	Current value	Accrued dividends	Annualized % dividend Yield/Anticipated Income (annualized)
37,880.86	SMITH BARNEY MUNICIPAL MONEY MARKET FD CL A	$ 37,880.86	$ 17.42	3.28% $ 1,242.49
Total money funds		**$ 37,880.86**	**$ 17.42**	**3.27 $ 1,242.49**

Common stocks & options

Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
19.4873	AT&T CORP	02/03/87	$ 577.70	$ 29.664	$ 50.813	$ 990.21	$ 412.51	LT	
749.5127	SYMBOL T/RATING B+	02/03/95	17,501.24	23.365	50.813	38,084.99	20,583.75	LT	
769			**18,078.94**	**23.51**		**39,075.20**	**20,996.26**		**1,731 878.72**
1,200	AMERICAN EXPRESS CO SYMBOL AXP/RATING B+	03/13/95	40,054.98	33.018	166.25	199,500.00	159,445.02	LT	541 1,080.00
1,600	AMGEN INC	02/08/90	1,810.67	1.135	60.063	96,100.80	94,284.13	LT	
4,000	SYMBOL AMGN/RATING B	06/14/90	6,333.33	1.583	60.063	240,252.00	233,918.67	LT	
5,600			**8,150.00**	**1.455**		**336,352.80**	**328,202.80**		

SALOMON SMITH BARNEY
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Ref: 00008430 00032300

Select Client Statement
December 1 - December 31, 1999

CONGRESSMAN NICK JOE RAHALL II Account number 685-03503-12 291

Common stocks & options *continued*

Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
208	ASSOCIATES FIRST CAPITAL CORP CLASS A SYMBOL: AFS	09/30/93	$ 3,713.47	$ 18.006	$ 27.438	$ 3,707.10	$ 1,991.63	LT	.847 % $ 54.08
1,000	BRISTOL MYERS SQUIBB CO SYMBOL: BMY/RATING: A	07/12/83	8,189.48	5.045	64.188	102,700.80	94,511.32#	LT	1.529 1,569.00
1,000	COCA-COLA CO SYMBOL: KO/RATING: A+	12/28/93	22,544.75	22.257	58.25	58,250.00	35,705.25	LT	1.098 640.00
600	EASTMAN KODAK CO SYMBOL: EK/RATING: B	08/26/93	29,748.65	49.581	66.25	39,750.00	10,001.35	LT	2.656 1,056.00
2,000	FEDERAL HOME LN MTG CORP SYMBOL: FRE/RATING: A+	11/23/94	24,363.54	12.031	47.063	94,126.00	69,762.46	LT	1.274 1,200.00
400	FORD MOTOR CO SYMBOL: F/RATING: B+	09/30/93	7,404.70	18.511	53.313	21,325.20	13,920.50	LT	3.751 800.00
3,000	HOME DEPOT INC SYMBOL: HD/RATING: A+ Stock split pending	01/05/94	40,000.00	13.333	103.125	309,375.00	269,375.00	LT	.155 480.00
792	HOMEFED CORP NEW SYMBOL: HFDC	08/21/98	141.77	.179	.875	693.00	551.23	LT	
2,700	HOUSEHOLD INTERNATIONAL INC SYMBOL: HI/RATING: B+	02/03/95	37,408.84	13.705	37.25	100,575.00	63,166.16	LT	1.825 1,836.00
1,000	LEUCADIA NATIONAL CORP SYMBOL: LUK/RATING: B	06/01/95	18,801.30	16.801	23.125	23,125.00	6,323.70	LT	6.832 1,580.00
18.8264	LUCENT TECHNOLOGIES INC	02/03/87	235.64	14.004	75.00	1,261.98	1,026.34#	LT	
647.1736	SYMBOL: LU	02/03/95	7,138.47	11.03	75.00	48,538.02	41,399.55	LT	
664			7,374.11	11.108		49,800.00	42,425.89		.108 53.12
2,600	MCDONALDS CORP SYMBOL: MCD/RATING: A+	08/22/94	[illegible]	13.187	40.313	98,761.20	84,704.96	LT	.483 468.00
1,400	MERCK & CO INC SYMBOL: MRK/RATING: A+	12/23/86	9,308.83	6.61	67.188	94,063.20	84,754.27#	LT	1.728 1,624.00

SALOMON SMITH BARNEY

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Ref: 00006430 00032301

Select Client Statement

December 1 - December 31, 1999

CONGRESSMAN NICK JOE RAHALL II Account number 685-03503-12 291

Common stocks & options *continued*

Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
600	MINNESOTA MINING & MFG CO SYMBOL: MMM/RATING: A	11/25/92	$ 29,718.21	$ 49.53	$ 97.875	$ 58,725.00	$ 29,006.79	LT	2.288% $ 1,344.00
.8109 31.1891 32	NCR CORP NEW SYMBOL: NCR	02/03/87 02/03/95 	28.90 875.48 904.38	35.713 28.124 28.262	37.875 37.875 	30.71 1,181.29 1,212.00	1.81 305.81 307.62	LT LT 	
2,000	TIME WARNER HOLDINGS CO SYMBOL: TWX/RATING: B-	01/18/93	32,783.72	16.197	72.313	144,626.00	111,842.28	LT	.249 360.00
1,200	VIACOM INC CL B SYMBOL: VIAB/RATING: B-	06/30/95	29,372.31	24.187	60.438	72,525.60	43,153.29	LT	
4,000	WAL-MART STORES INC SYMBOL: WMT/RATING: A+	01/15/85	8,209.82	1.275	83.125	332,500.00	325,290.18	LT	.269 [illegible]
500	WM WRIGLEY JR CO SYMBOL: WWY/RATING: A+	05/22/98	29,889.66	53.154	82.938	41,469.00	14,569.34	LT	1.688 700.00
Total common stocks and options			$ 431,217.80			$ 2,221,527.10	$ 0.00	ST	.74
						$ 1,790,309.30		LT	$ 18,479.92

Direct Investments

The following information, provided for your financial record keeping, will be shown throughout the life of the direct investment. The Original Purchase Amounts do not reflect current market value, or premiums/discounts on transferred units. Please note that direct investments are generally illiquid, are not currently priced, and are not included in your Net Value. If you have invested in a fund that has multiple capital contributions, please note that the original purchase amount represents your total capital commitment. The assets listed in this section are included as a service to you and are provided for informational purposes only. The information (including valuation) regarding these assets is derived from external sources, which may include information provided by you, for which Salomon Smith Barney is not responsible. These assets are not covered by SIPC. If you have any questions regarding Direct Investments, please contact your Financial Consultant.

Number of units	Description	Orig. purchase amount	Unit cost	Current unit price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
20	SCOTTSDALE LAND TRUST L P Purchase date 08/30/88	$ 20,000.00	$ 1,000.00	NOT PRICED	NOT PRICED			
Total direct investments		$ 20,000.00						
Total portfolio value		$ 489,088.80			$ 2,259,407.39	$ 0.00	ST	.78
					$ 1,790,309.30		LT	$ 17,723.41

##Based on information supplied by your Financial Consultant.

SALOMON SMITH BARNEY

A member of citigroup

Corrected Copy as of 02/07/00
Ref: 00000883 00000869

Select Client Statement Forms 1099 for 1999

CONGRESSMAN NICK JOE RAHALL II

Account Number 685-03503-12 291 SS # 236-78-8645

Payer	Your Financial Consultant	
SALOMON SMITH BARNEY INC.	JAMES A JOSEPH/PETER JOSEPH	CONGRESSMAN NICK JOE RAHALL II
388 GREENWICH STREET	SALOMON SMITH BARNEY INC	3AM ACCOUNT
NEW YORK, NEW YORK 10013	701 MAIN STREET	218 1/2 MAIN STREET
Attn: Tax Reporting Service Center	SUITE 100	BECKLEY WV
Tax ID Number 11-2418191	STROUDSBURG PA 18360	25801-4813
	Branch Office 570-421-3100	

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-DIV Dividends and Distributions 1999

(OMB No.1545-0110)

Ordinary dividends	Total capital gain distributions	28% rate gain	Unrecaptured sec 1250 gain	Section 1202 gain	Nontaxable distributions
$ 14,658.90					
Box 1	Box 2a	Box 2b	Box 2c	Box 2d	Box 3

Federal income tax withheld	Investment expenses	Foreign tax paid	Foreign country or US possession	Liquidation distributions - cash	Liquidation distributions - non cash
				$ 13,580.00	
Box 4	Box 5	Box 6	Box 7	Box 8	Box 9

SALOMON SMITH BARNEY

A member of citigroup

Corrected Copy as of 02/07/00
Ref: 00000883 00008074

Select Client Statement
1999 Year End Summary

CONGRESSMAN NICK JOE RAHALL II
Account Number 685-03503-12 291 SS # 236-78-8645

Details of Long Term Gain (Loss) 1999

This section shows your sales of securities during the year. The "Sale Proceeds" column excludes any accrued income you may have received. Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Reference number	Quantity	Security Description	Opening Trade Date	Closing Trade Date	Sale Proceeds	Cost	(Loss)	Gain
125000100	1,000	LEUCADIANATIONALCORP GENERATED- CIN AS OF 05/22/99	06/01/95	05/22/99	$ 12,000.00	$ 8,954.34		$ 3,045.66 [b]
Total					$ 12,000.00	$ 8,954.34		$ 3,045.66

[b] *Based on information supplied by your Financial Consultant.*

Details of Deposits and Withdrawals 1999

This section reflects any deposits or withdrawals made to your account during the year

Deposits

Reference number	Date	Description	Amount
210000100	10/25/99	DEPOSIT RECEIVED AT 00645 - STROUDSBURG PA	$ 10,000.00
Total			$ 10,000.00

Withdrawals

Reference number	Date	Description	Referral number	Amount
220000100	03/19/99	INVESTMENT & ADVISORY SERVICES FROM 03/01/99 TO 05/31/99		$ 1,726.88
220000300	09/17/99	INVESTMENT & ADVISORY SERVICES FROM 09/01/99 TO 11/30/99		1,773.82
220000500	12/17/99	INVESTMENT & ADVISORY SERVICES FROM 12/01/99 TO 02/29/00		1,895.46
Total				$ 30,143.12

Reference number	Date	Description	Referral number	Amount
220000200	06/18/99	INVESTMENT & ADVISORY SERVICES FROM 06/01/99 TO 08/31/99		$ 1,748.98
220000400	10/12/99	CHECK 008529258 BY STROUDSBURG PA		23,000.00

1-1-99 YEAR END SUMMARY

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

Your Financial Advisor
MR PEAR/MR HANDO
MORGAN STANLEY DEAN WITTER
1775 EYE STREET, NW SUITE 200
WASHINGTON, DC 20006
(202) 862-9000

Account Number FA
642 108600 022

AAA Customer Service
1-800-869-3326

THE HONORABLE NICK JOE RAHALL II 000471
ACCESS #1-NICHOLAS APPLEGATE
PRIVATE & CONFIDENTIAL 642
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

Asset Summary

	Value	% of Assets
Money Market Funds	$6,608.76	4.4%
Stocks	138,501.27	95.6
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$144,910.03	100.0%
Cash	1.46	
Total Asset Value	$144,911.49	

Income Summary

	Year To Date
Money Market Funds	$333.20
Stocks	774.05
Municipal Bonds	0.00
Corporate Fixed Income	0.00
Government Securities	0.00
Mutual Funds	0.00
Unit Investment Trusts	0.00
Certificates of Deposit	0.00
Other	0.00
Total Income	$1,107.25
Taxable Income	$1,107.25
Tax Exempt Income	$0.00

Activity Summary

Total Asset Value January 01, 1999		$107,654.35
Cash/Money Market Activity for 1999		
Credits To Your Account		
Dividend and Interest	1,107.25	
Deposits	0.00	
Sales Proceeds/Redemptions	164,384.30	
Other Credits	44.65	
Total Credits	165,536.29	
Debits To Your Account		
Checking	0.00	
Debit Card	0.00	
Withdrawals	-15,000.00	
Funds to Purchase Securities	-150,677.34	
Other Debits	-3,006.44	
Total Debits	-166,683.78	
Changes in Asset Value for 1999		
Value of Priced Assets 1/01/99	$100,061.92	
Securities Bought	150,677.34	
Securities Received	0.00	
Securities Sold/Redeemed	-164,384.30	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	$2,146.31	
Value of Priced Assets 12/31/99	138,501.27	
Net Change in Asset Value		36,439.35
Total Asset Value as of December 31, 1999		$144,911.49

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	1.46	---	---
ACTIVE ASSETS MONEY TRUST	6,408.76	4.4%	345
Total Cash and Money Market Funds	6,410.22	4.4%	$345

Net Change Since January 1, 1999 -1,167.58

Annualized 30 Day Yields

Active Assets Money Trust.....5.39%
Active Assets Govt. Sec. Tr.....5.83%
Active Assets California Tax Free.....2.76%
Active Assets Tax Free Trust.....3.22%
Active Assets Insured Account.....4.80%
Active Assets Deposit Account.....4.80%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
27	AMAZON COM INC	74 1/8	2,055.37	1.4%	0	0.00%	AMZN	
53	AMGEN INC	60 1/16	3,183.31	2.2%	0	0.00%	AMGN	
21	ARACRUZ CELULOSE SA AMER MEN	26 1/4	551.25	0.4%	2	.50%	ARA	Next Dividend Payable 04/00
11	ARM HOLDINGS PLC ADS	191 1/2	2,106.50	1.5%	0	0.00%	ARMHY	
8	ASM LITHOGRAPHY HLDG NV ORD	113 3/4	910.00	0.6%	0	0.00%	ASML	
30	AT&T CORPORATION	50 13/16	1,524.37	1.1%	24	1.73%	T	Next Dividend Payable 02/01/00
46	AT&T LIBERTY MEDIA GROUP A	54 13/16	2,613.37	1.8%	0	0.00%	LMGA	
12	AXA ADS	71	852.00	0.6%	9	1.07%	AXA	Next Dividend Payable 06/00
52	BANK OF TOKYO-MITSUBISHI LTD	13 15/16	724.75	0.5%	3	.46%	MBK	Next Dividend Payable 06/00
194	BILLITON PLC ADR	5 5/8	1,091.25	0.8%	17	1.58%	BLTDY	
11	BIOVAIL CORP INTERNATIONAL	93 3/4	1,031.25	0.7%	0	0.00%	BVF	
4	BRITISH TELECOMMUNIC PLC ADR	238	952.00	0.7%	13	1.42%	BTY	Next Dividend Payable 03/00
20	CANON INC ADR NEW	40 9/16	811.25	0.6%	2	.33%	CANNY	Next Dividend Payable 01/13/00
95	CATHAY PCFC ARNYS LTD NW S ADR	8 7/8	843.12	0.6%	5	.63%	CPCAY	Next Dividend Payable 04/00
41	CBS CORPORATION	63 15/16	2,621.43	1.8%	0	0.00%	CBS	
27	CISCO SYS INC	107 1/8	2,892.37	2.0%	0	0.00%	CSCO	
8	COLT TELECOM GROUP PLC ADR	204	1,632.00	1.1%	0	0.00%	COLT	
58	COMCAST SPL A	50 9/16	2,932.62	2.0%	5	.18%	CMCSK	
22	COOKSON GROUP PLC SP ADR	20 3/4	456.50	0.3%	16	3.61%	CKSNY	Next Dividend Payable 06/00
21	CORNING INC	128 15/16	2,707.68	1.9%	15	.55%	GLW	Next Dividend Payable 03/00
45	CORUS GROUP PLC ADS	25 7/8	1,164.37	0.8%	73	6.34%	CGA	
4	DAI ICHI KANGYO BK LTD	93 1/4	373.00	0.3%	2	.71%	DAIKY	Next Dividend Payable 06/00
32	DE BEER CONS MINES ADR DEFD	28 15/16	926.00	0.6%	25	2.68%	DBRSY	Next Dividend Payable 05/00
12	DEUTSCHE BANK AG SP ADR	84	1,008.00	0.7%	10	1.02%	DTBKY	Next Dividend Payable 05/00
17	DEUTSCHE TELEKOM AG 1 ORD 1ADS	71	1,207.00	0.8%	8	.66%	DT	
14	EIDOS PLC ADR	83	1,162.00	0.8%	0	0.00%	EIDSY	
20	EMC CORP MASS	109 1/4	2,185.00	1.5%	0	0.00%	EMC	
7	ENI SPA AMER DEP RCPT	55 1/8	385.87	0.3%	8	2.11%	E	
13	EPCOS A G	74 1/2	968.50	0.7%	0	0.00%	EPC	
11	EQUANT N.V.	112	1,232.00	0.9%	0	0.00%	ENT	

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
18	ERICSSON LM TEL ADR B SEK 10	65 11/16	1,182.37	0.8%	3	.31%	ERICY	Next Dividend Payable 04/00
28	FLEXTRONICS INTL LTD	46	1,288.00	0.9%	0	0.00%	FLEX	
16	FORTIS AMEV NV SPS ADR	35 3/4	572.00	0.4%	7	1.30%	FAMVY	
45	FRESENIUS MEDICAL CARE AG	28 3/8	1,276.87	0.9%	6	.52%	FMS	
5	FUJITSU LTD ADR NEW	227 5/8	682.87	0.5%	1	.15%	FJTSY	Next Dividend Payable 06/00
24	GENENTECH INC	134 1/2	3,228.00	2.2%	0	0.00%	DNA	
21	GENERAL MOTORS CORP H (NEW)	96	2,016.00	1.4%	0	0.00%	GMH	
55	GKN PUB LTD CO ADR	16 1/8	544.37	0.4%	8	1.55%	GKNPY	Next Dividend Payable 04/00
25	HOME DEPOT INC	68 3/4	1,718.75	1.2%	4	.23%	HD	Next Dividend Payable 03/00
12	HOME DEPOT INC	68 3/4	825.00	0.6%	1	.23%	HD	Pending Stock Distribution
18	HSBC HOLDINGS PLC SPON ADR NEW	71 3/8	1,284.75	0.9%	28	2.22%	HBC	Next Dividend Payable 04/00
31	INDEPNDT ENRGY HLDGS PLC ADS	33 5/16	1,032.68	0.7%	0	0.00%	INDYY	
68	INFINITY BRDADCASTING CP A NEW	36 3/16	2,460.75	1.7%	0	0.00%	INF	
18	INTEL CORP	82 5/16	1,481.62	1.0%	2	.14%	INTC	Next Dividend Payable 03/00
17	INTERNET INITIATIVE JAPAN INC	97 3/16	1,652.18	1.1%	0	0.00%	IIJI	
100	INVENSYS PLC SPONS ADR	10 3/4	1,075.00	0.7%	18	1.73%	INVSY	Next Dividend Payable 03/17/00
9	JAPAN TELECOM LTD ADR	80	720.00	0.5%	0	0.00%	JPNTY	
8	KONIN PHILIPS ELEC NV NEW	135	1,080.00	0.7%	7	.68%	PHG	
6	KUBOTA CP ADR	77 1/2	465.00	0.3%	5	1.17%	KUB	Next Dividend Payable 06/00
9	KYOCERA CP ADR	262	2,358.00	1.6%	4	.17%	KYO	Next Dividend Payable 04/00
31	LUCENT TECHNOLOGIES	75	2,325.00	1.6%	2	.10%	LU	Next Dividend Payable 03/00
14	MAGYAR TAVKOZLESIRT	36	504.00	0.3%	1	.37%	MTA	
5	MANNESMANN AG SP ADR	240	1,200.00	0.8%	2	.19%	MMNSY	Next Dividend Payable 06/00
21	MARUBENI CORP ADR	41 7/8	879.37	0.6%	8	1.00%	MARUY	Next Dividend Payable 06/00
26	MCI WORLDCOM INC	56	1,456.00	1.0%	0	0.00%	WCOM	
13	MCI WORLDCOM INC	56	728.00	0.5%	0	0.00%	WCOM	Pending Stock Distribution
22	MICROSOFT CORP	116 3/4	2,568.50	1.8%	0	0.00%	MSFT	
7	MODERN TIMES GP HTG AB ADR	265	1,855.00	1.3%	0	0.00%	MTGNY	
20	MOTOROLA INC	147 1/4	2,945.00	2.0%	9	.32%	MOT	Next Dividend Payable 01/14/00
28	NINTENDO CO LTD ADR NEW	20 1/2	574.00	0.4%	2	.45%	NTDOY	Next Dividend Payable 06/00
19	NIPPON TELEGRAPH&TELEPHONE ADS	86 1/8	1,636.37	1.1%	6	.42%	NTT	Next Dividend Payable 06/00
14	NOKIA CP ADR	191 1/16	2,674.87	1.8%	7	.28%	NOK	Next Dividend Payable 04/00
3	NOMURA SEC LTD ADR JAPAN 10COM	180 1/4	540.75	0.4%	2	.37%	NMSCY	Next Dividend Payable 07/00
16	NORTEL NETWORKS CORP ADR	101	1,616.00	1.1%	2	.14%	NT	Next Dividend Payable 03/00
9	NTT MOBILE COMM NETWK ADR NEW	191 7/8	1,726.87	1.2%	0	.02%	NMCNY	
30	OMNICOM GROUP	100	3,000.00	2.1%	21	.70%	OMC	Next Dividend Payable 01/06/00
35	ORACLE CORP	112 1/16	3,922.18	2.7%	0	0.00%	ORCL	
18	ORIX CORP	113 7/16	2,041.87	1.4%	0	.04%	IX	
30	PECHINEY	36 5/16	1,089.37	0.8%	10	.94%	PY	
21	PRIMACOM AG SPON ADR	32 5/8	685.12	0.5%	0	0.00%	PCAG	
49	RHODIA SPONSORED ADR	23 5/8	1,157.62	0.8%	8	.76%	RHA	
11	ROYAL PTT NEDERLAND N.V ADS	96	1,056.00	0.7%	10	.96%	KPN	
8	SANWA BANK LTD(JAPAN)ADR	121 3/8	971.00	0.7%	3	.36%	SANWY	Next Dividend Payable 06/00
13	SAP AKTIENGESELLSCHAFT ADS	52 1/16	676.81	0.5%	1	.19%	SAP	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
32	SBC COMMUNICATIONS	48 3/4	1,560.00	1.1%	31	2.00%	SBC	Next Dividend Payable 02/00
11	SCHLUMBERGER LTD	56 1/8	617.37	0.4%	8	1.33%	SLB	Next Dividend Payable 01/07/00
10	SEVEN ELEVEN JAPAN CO LTD ADR	158 1/4	1,582.50	1.1%	2	.17%	SVELY	Next Dividend Payable 04/00
21	SHIRE PHARM GROUP PLC ADS	29 1/8	611.62	0.4%	0	0.00%	SHPGY	
20	SHL TRNSATRAD PLC NY SH NEW	49	980.00	0.7%	26	2.72%	SC	Next Dividend Payable 05/00
16	SOMERA CORP ADS	69 1/4	1,108.00	0.8%	0	0.00%	SARA	
10	SONY CORP ADR 1974 NEW	284 3/4	2,847.50	2.0%	4	.14%	SNE	Next Dividend Payable 06/00
28	SPRINT PCS SERIES 1	102 1/2	2,870.00	2.0%	0	0.00%	PCS	
8	STMICROELECTRONICS NV	151 7/16	1,211.50	0.8%	0	.03%	STM	
36	SUN MICROSYSTEMS INC	77 7/16	2,787.75	1.9%	0	0.00%	SUNW	
18	TAIWAN SMCNDCTR MFG CO LTD ADR	45	810.00	0.6%	0	0.00%	TSM	
4	TAIYO YUDEN CO LTD UNSP ADR	236 3/4	947.00	0.7%	1	.11%	TYOYY	Next Dividend Payable 06/00
19	TELE DANMARK A/S ADS	37 3/4	717.25	0.5%	9	1.33%	TLD	Next Dividend Payable 05/00
14	TELEFONICA DE ESPANA SA ADR	78 13/16	1,261.00	0.9%	0	0.00%	TEF	
19	TEXAS INSTRUMENTS	96 5/8	1,835.87	1.3%	3	.17%	TXN	Next Dividend Payable 02/00
23	TNT POST GRP N. V ADR	28 5/8	658.37	0.4%	7	1.13%	TP	
10	TOTAL FINA SA ADS	69 1/4	692.50	0.4%	8	1.24%	TOT	
20	UPM KYMMENE CORP ADR	42 3/4	855.00	0.5%	19	2.29%	UPM	
8	UTD PAN-EUROPE COMM NV SP AD A	127 1/2	1,020.00	0.7%	0	0.00%	UPCOY	
52	VITESSE SEMICONDUCTORS	52 7/16	2,726.75	1.8%	0	0.00%	VTSS	
42	WAL MART STORES INC	69 1/8	2,903.25	2.0%	8	.28%	WMT	Next Dividend Payable 01/10/00
Total Stocks			136,501.22	95.4%	8578	6.1%		
Net Change Since January 1, 1999			38,439.35					

Asset Summary	Value	Est Yrly Income
Total Asset Value	144,311.49	8924
Total Net Change In Priced Assets Since January 1, 1999	38,439.35	

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Attachment 4 - p.1

MORGAN STANLEY DEAN WITTER

1099-DIV

STATEMENT FOR TAX YEAR 1999

OMB NO
1545-0110

Account Number 642 108600 FA 022

Social Security Number 236-78-8645

FA Phone Number (202) 862-9000

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE 001875
PRIVATE & CONFIDENTIAL
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

DIVIDENDS AND DISTRIBUTIONS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

The following dividend information is reported to the IRS by payer. When preparing your income tax return you should list payer information separately as shown below.

Payer	1. Ordinary Dividends	2a. Total Capital Gain Distributions	2b. 28% Gain Distributions	2c. Section 1250 Gain Distributions	3. Non-Taxable Distributions	4. Federal Income Tax Withheld	6. Foreign Tax Paid
DEAN WITTER REYNOLDS INC. PAYER'S FED. ID. # 94-1671384	774.14	0.00	0.00	0.00	0.00	0.00	34.72
ACTIVE ASSETS MONEY TRUST PAYER'S FED. ID. # 13-3075005 PLAN NUMBER 260-014665391	333.20	0.00	0.00	0.00	0.00	0.00	0.00

IMPORTANT TAX INFORMATION - PLEASE RETAIN FOR YOUR RECORDS

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

DETAIL OF DIVIDENDS AND DISTRIBUTIONS

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
ABITIBI CONSOLIDATED INC							
07/02/99	2.44						0.37
10/01/99	5.74						0.86
AFLAC INCORPORATED							
03/01/99	1.17						
06/01/99	1.65						
AMERICAN INTERNATIONAL GP							
03/19/99	0.67						
06/18/99	0.67						
09/17/99	0.75						
AMERITECH CORP							
05/03/99	7.94						
08/02/99	7.94						
11/01/99	7.94						
ARACRUZ CELULOSE SA AMER NEW							
04/29/99	4.02						
AT&T CORPORATION							
08/02/99	6.60						
11/01/99	6.60						
AUTOLIV INC							
03/04/99	2.75						
BANCO COMER PORTUGUES ADS							
04/26/99	10.38						2.08
BANCO DE SANTANDER ADR							
04/19/99	2.25						0.45
BANK OF TOKYO-MITSUBISHI LTD							
07/09/99	2.59						0.39
12/20/99	3.59						0.54
BARCLAYS PLC ADR							
04/30/99	4.19						0.63
10/01/99	5.11						0.51
BP AMOCO PLC ADS							
06/18/99	1.33						0.13
09/10/99	1.33						0.13
BRIDGESTONE CP ADR							
04/16/99	2.76						0.41
09/21/99	2.45						0.37

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
BRITISH TELECOMMUNIC PLC ADR							
02/23/99	6.58						0 99
09/27/99	8.81						0 88
BROKEN HILL PROP LTD ADR SPNSR							
06/09/99	7.33						1.10
12/02/99	10.39						
BURLINGTON RESOURCES INC							
01/04/99	3.71						
04/01/99	3 71						
07/01/99	3.71						
10/01/99	3.71						
CAPITAL ONE FINANCIAL CORP							
02/22/99	0 80						
05/20/99	0 80						
CATHAY MCFC ARWYS LTD NW S ADR							
10/14/99	0.97						
CEMEX/TOLMEX S.A D.E SP ADR							
06/14/99	15.47						
CIGNA CP							
07/10/99	5.40						
10/10/99	5.40						
CITY DEV LTD SPON ADR							
07/06/99	1.86						
COFLEXIP SPONSORED ADR							
06/29/99	4.84						0 73
COMCAST SPL A							
03/25/99	0.54						
COMPAQ COMPUTER CORP							
01/20/99	0.70						
COOKSON GROUP PLC SP ADR							
12/08/99	8.37						0 84
CORP BANCARIA ESPANA AM DEP SH							
03/08/99	3.65						0 91
CORUS GROUP PLC ADS							
10/26/99	197.90						
CRH PLC ADR							
11/12/99	3.16						0 73
DAIMLER-CHRYSLER AG							
05/19/99	15.02						1.50

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
DAYTON HUDSON CORP							
06/10/99	2.20						
09/10/99	3.30						
12/10/99	3.30						
DIXONS GRP PLC ADR							
04/14/99	3.02						0.45
FRESENIUS MEDICAL CARE AG							
06/11/99	5.64						
FRONTIER CORP							
05/03/99	2.05						
FUJITSU LTD ADR NEW							
07/16/99	1.93						0.29
12/20/99	1.85						0.28
GIGN PUB LTD CO ADR							
04/16/99	10.53						1.05
10/15/99	3.62						0.36
GROUPE DANONE SPONSORED ADR							
07/14/99	5.24						
HITACHI 10 COM NEW ADR							
12/20/99	3.75						0.56
HOME DEPOT INC							
12/16/99	1.50						
HONDA MOTOR COMPANY LTD ADR							
07/08/99	1.15						0.17
HSBC HLDG PLC SPND ADR NEW							
04/28/99	13.06						1.96
HSBC HOLDINGS PLC SPON ADR NEW							
10/07/99	13.30						1.33
HUTCHISON WHAMPOA ADR							
06/04/99	9.28						
IMS HEALTH INC							
03/12/99	0.48						
06/11/99	0.48						
ING GROEP NV ADR							
05/25/99	8.11						
INTEL CORP							
12/01/99	0.54						
ISPAT INTL N.V.							
06/04/99	4.05						

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
JOHNSON & JOHNSON							
12/07/99	5.88						
KAO CORP ADR							
07/16/99	3.18						0.48
12/16/99	4.74						0.71
KINGFISHER PLC SPN ADR							
07/12/99	4.52						0.45
KONINKLIJKE AHOLD NV ADS							
06/25/99	4.47						
KOREA ELECTRIC POWER CORP ADS							
06/28/99	11.31						1.87
KYOCERA CP ADR							
12/15/99	2.61						0.39
LUCENT TECHNOLOGIES							
09/01/99	0.62						
12/01/99	0.62						
MANNESMANN AG SP ADR							
06/10/99	2.80						
MARUICO LTD ADR NEW							
05/17/99	5.55						
MOTOROLA INC							
07/15/99	2.40						
10/15/99	2.40						
NATL GRID GROUP PLC ADR							
02/25/99	7.16						1.07
NINTENDO CO LTD ADR NEW							
12/27/99	3.69						
NIPPON TELEGRAPH&TELEPHONE ADS							
12/28/99	2.27						0.34
NOKIA CP ADR							
04/07/99	7.24						1.09
NORTEL NETWORKS CORP ADR							
09/30/99	0.60						0.09
12/31/99	0.60						0.09
OLYMPUS OPTICAL SPON ADR							
07/12/99	2.38						0.36
OMNICOM GROUP							
01/05/99	4.50						
04/01/99	4.50						

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1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
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Account Number FA
642 108600 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
OMNICOM GROUP							
07/01/99	4 50						
10/08/99	4.50						
PEARSON PLC SP ADR							
06/14/99	5 53						0 55
PERUSAHAAN PERSEROAN INDONESIA							
07/12/99	3.84						
ROCHE HOLDINGS ADR							
05/28/99	2 29						0 34
SANWA BANK LTD(JAPAN)ADR							
12/29/99	2.51						0 38
SCHLUMBERGER LTD							
07/09/99	1.88						
SERVICE CORP INTL							
01/29/99	1 80						
SEVEN ELEVEN JAPAN CO LTD ADR							
12/02/99	0 95						
SHL TRNS&TRAD PLC NY SH NEW							
11/05/99	12.06						1.21
SMITHKLINE PLC ADS 5							
04/15/99	4 21						0.63
07/15/99	1.93						0.19
SOCIETE GENERALE SP ADR							
06/22/99	11 97						
SONY CORP ADR 1974 NEW							
07/08/99	3.07						0.46
12/06/99	2 40						0.36
SWISSCOM AG							
07/06/99	10.85						
TELE NORTE LESTE PART SA ADR							
07/15/99	14.54						0.17
TELSTRA CP LTD GDR							
05/10/99	5 42						0.81
TEXAS INSTRUMENTS							
11/22/99	0 81						
TOMRA SYS A/S ADR NEW							
05/12/99	1.16						0 17
TOTAL FINA SA ADS							
08/11/99	8 65						

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
TYCO INTERNATIONAL LTD NEW							
02/01/99	0.30						
05/03/99	0.30						
08/02/99	0.30						
11/01/99	0.58						
UNILEVER PLC (NEW) ADS							
12/29/99	3.91						0.39
VIVENDI SPONSORED ADR							
06/04/99	8.56						
06/14/99	13.64						
VODAFONE AIR TOUCH PUB LTD							
02/22/99	3.80						0.57
08/23/99	3.67						0.55
WASHINGTON MUTUAL INC							
02/12/99	9.43						
05/14/99	9.84						
WILLIAMS CO INC							
03/29/99	6.00						
06/28/99	6.00						
09/13/99	6.00						
12/27/99	6.00						
WOLTERS KLUWER NV SPON ADR							
05/05/99	2.85						
Total	774.14	0.00	0.00	0.00	0.00	0.00	34.72
ACTIVE ASSETS MONEY TRUST							
1999	333.20						
Total	333.20	0.00	0.00	0.00	0.00	0.00	0.00

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
26	TRANSACTION SYS ARCH INC A	12-21-98	43.25	1,124.50	1-04-99	48.08	1,250.12	125.62
0	AMERICAN INTERNATIONAL GP	1-05-99	.00	.00	1-05-99	.00	81.37	81.37
7	SEKISUI HOUSE LTD ADR	11-06-98	101.88	713.13	1-08-99	100.00	699.97	(13.16)
13	SHIRE PHARM GROUP PLC ADS	7-23-98	27.24	354.17	1-08-99	20.37	264.87	(89.30)
5	BENCKISER NV CLASS B	9-01-98	54.96	274.78	1-11-99	70.03	350.16	75.38
7	GALLAHER GP PLC ADR	9-16-98	26.58	186.06	1-11-99	26.31	184.18	(1.88)
9	ABBEY NATIONAL PLC SP ADR	10-13-98	36.13	325.13	1-12-99	43.00	386.98	61.85
16	AT HOME CORPORATION	9-09-98	34.64	554.27	1-13-99	99.27	1,588.26	1,033.99
7	BAYRSCHE HYP UND VER AG SP ADR	11-24-98	79.76	558.30	1-14-99	73.40	513.78	(44.52)
11	KINGFISHER PLC SPN ADR	10-07-98	19.15	210.70	1-14-99	21.05	231.56	20.86
20	FUJI PHOTO ADR NEW	10-13-98	35.44	708.75	1-15-99	34.75	694.97	(13.78)
5	CELLULAR COMM INTL	8-25-98	62.88	314.38	1-22-99	80.06	400.29	85.91
1	DIXONS GRP PLC ADR	11-27-98	36.75	36.75	1-22-99	48.00	48.00	11.25
11	DIXONS GRP PLC ADR	11-23-98	34.50	379.50	1-22-99	48.00	527.98	148.48
11	TELEFONOS DE MX SA DE CV ADR	10-12-98	46.56	512.20	1-22-99	49.60	545.60	33.40
22	BANCO DE GAL Y BUENOS AIRE ADR	10-16-98	14.56	320.25	1-28-99	11.87	261.24	(59.01)
10	TDK CP ADR NEW	12-22-98	86.68	866.84	1-29-99	82.25	822.47	(44.37)
10	NEWBRIDGE NETWORKS	12-07-98	30.74	307.36	2-05-99	29.25	292.49	(14.87)
4	NOVARTIS AG ADR	10-26-98	91.00	364.00	2-05-99	92.75	370.98	6.98
6	DASSAULT SYSTEMS SA ADS	11-17-98	36.09	216.53	2-12-99	40.92	245.52	28.99
17	ORIX CORP	9-23-98	31.94	543.03	2-15-99	31.20	530.42	(12.61)
23	NETWORKS ASSOCIATES INC	11-30-98	52.06	1,197.44	2-18-99	41.04	943.87	(253.57)
6	GALLAHER GP PLC ADR	9-18-98	26.96	161.74	2-22-99	27.00	162.00	.26
8	GALLAHER GP PLC ADR	9-16-98	26.58	212.64	2-22-99	27.00	215.99	3.35
7	GALLAHER GP PLC ADR	10-07-98	29.24	204.71	2-22-99	27.00	188.99	(15.72)

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II

1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT

MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
13	ABBEY NATIONAL PLC SP ADR	10-13-98	36.12	469.62	2-24-99	40.37	524.86	55.24
11	COMPAQ COMPUTER CORP	10-28-98	29.56	325.19	2-26-99	35.31	388.42	63.23
24	COMPAQ COMPUTER CORP	9-01-98	29.00	696.00	2-26-99	35.31	847.47	151.47
16	BRITISH AEROSPACE SPN ADR	12-01-98	33.75	540.00	3-01-99	25.50	407.98	(132.02)
11	FUJITSU LTD ADR NEW	10-23-98	53.75	591.25	3-01-99	60.00	659.97	68.72
26	HUANENG PWR INTL SPN ADR N SHS	11-27-98	15.96	415.04	3-01-99	9.25	240.49	(174.55)
4	VALEO SPONSORED ADR	7-31-98	96.00	384.00	3-01-99	84.50	337.98	(46.02)
11	AUTOLIV INC	8-11-98	33.19	365.05	3-02-99	38.30	421.30	56.25
46	KOREA ELECTRIC POWER CORP ADS	10-16-98	11.59	533.20	3-02-99	14.12	649.72	116.52
27	WATSON PHARMACEUTICAL INC	6-10-98	45.38	1,225.13	3-02-99	49.06	1,324.64	99.51
7	MANNESMANN AG SP ADR	4-22-98	79.20	554.40	3-04-99	123.00	860.97	306.57
36	VOLKSWAGEN AG SPON ADR	12-21-98	15.50	558.00	3-04-99	12.12	436.48	(121.52)
2	ARGENTARIA CAJA POSTAL ADR	1-07-99	54.43	108.85	3-05-99	46.62	93.25	(15.60)
12	ARGENTARIA CAJA POSTAL ADR	10-28-98	41.75	501.00	3-05-99	46.62	559.47	58.47
2	BANYU PHARMACEUTICALS ADR	9-24-98	280.50	561.00	3-05-99	311.99	623.97	62.97
46	APPLE COMPUTER INC	5-18-98	29.31	1,348.38	3-08-99	33.87	1,557.79	209.41
10	BLYTH INDUSTRIES INC	5-20-98	33.07	330.73	3-08-99	25.90	259.03	(71.70)
8	MAGYAR TAVKOZLESIRT	1-27-99	31.00	248.00	3-08-99	26.75	213.99	(34.01)
20	SERVICE CORP INTL	8-01-98	34.69	693.75	3-08-99	15.12	302.49	(391.26)
3	WOLTERS KLUWER NV SPON ADR	9-01-98	168.25	504.75	3-11-99	189.99	569.98	65.23
0	TELEFONICA DE ESPANA SA ADR	3-12-99	.00	.00	3-12-99	.00	19.22	19.22
5	ELAN PLC ADR	4-01-98	64.94	324.69	3-15-99	82.02	410.10	85.41
4	GLOBAL CROSSING LTD	12-10-98	19.57	78.26	3-16-99	58.48	233.91	155.65
4	CELLULAR COMM INTL	8-25-98	62.88	251.50	3-16-99	79.49	317.96	66.46
6	CELLULAR COMM INTL	9-24-98	56.50	339.00	3-16-99	79.49	476.92	137.92

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II

1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT

MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
5	NATL GRID GROUP PLC ADR	7-28-98	36.31	181.53	3-18-99	35.09	175.45	(6.08)
9	NATL GRID GROUP PLC ADR	6-22-98	32.75	294.75	3-18-99	35.09	315.80	21.05
1	NOVARTIS AG ADR	10-26-98	91.00	91.00	3-18-99	84.50	84.49	(6.51)
3	NOVARTIS AG ADR	12-15-98	97.00	291.00	3-18-99	84.50	253.49	(37.51)
35	DARDEN RESTAURANTS	5-20-98	15.25	533.75	3-26-99	20.42	714.66	180.91
23	LEXMARK INTL GROUP INC A	6-24-98	59.00	1,357.00	3-26-99	99.83	2,296.06	939.06
2	BRITISH TELECOMMUNIC PLC ADR	10-07-98	122.25	244.50	3-30-99	162.31	324.61	80.11
36	GRT UNV STR ORD ADR	1-21-99	12.63	454.50	4-01-99	10.52	378.65	(75.85)
13	GRT UNV STR ORD ADR	2-02-99	13.00	169.00	4-01-99	10.52	136.73	(32.27)
3	BANK OF IRELAND GRP	2-03-99	95.61	286.83	4-05-99	84.00	251.99	(34.84)
3	BANK OF IRELAND GRP	1-07-99	93.75	281.25	4-05-99	84.00	251.99	(29.26)
19	VNU NV SP ADR	9-01-98	43.00	817.00	4-13-99	35.87	681.60	(135.40)
4	DAIMLER-CHRYSLER AG	10-13-98	77.45	309.81	4-14-99	96.65	386.60	76.79
6	ARM HOLDINGS PLC ADS	4-22-98	42.25	253.50	4-14-99	139.31	835.88	582.38
4	EQUANT N.V.	2-03-99	82.50	330.00	4-14-99	94.32	377.27	47.27
25	GKN PUB LTD CO ADR	2-22-99	14.13	353.13	4-14-99	16.62	415.61	62.48
19	KONINKLIJKE AHOLD NV ADS	9-24-98	28.34	538.40	4-14-99	41.50	788.47	250.07
4	SMITHKLINE PLC ADS 5	12-09-98	65.80	263.20	4-14-99	71.25	285.00	21.80
14	SOCIETE GENERALE SP ADR	1-07-99	37.63	526.75	4-14-99	35.00	489.98	(36.77)
11	CHINA TELECOM LTD AMERN DEP SH	11-30-98	39.88	438.68	4-19-99	39.75	437.23	(1.45)
9	TELECOM CP NZ LTD ADS	3-02-99	39.88	358.88	4-19-99	39.87	358.86	(.02)
11	SHIRE PHARM GROUP PLC ADS	8-27-98	19.88	218.63	4-20-99	19.12	210.37	(8.26)
13	SHIRE PHARM GROUP PLC ADS	8-03-98	23.92	311.02	4-20-99	19.12	248.61	(62.41)
4	AXA ADS	2-04-99	70.00	280.00	4-21-99	63.00	251.99	(28.01)
4	AXA ADS	1-19-99	74.75	299.00	4-21-99	63.00	251.99	(47.01)

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II

1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT

MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
8	AXA ADS	3-10-99	66.34	530.75	4-21-99	63.00	503.98	(26.77)
13	CABLE & WIRELESS COMMS PLC	11-13-98	42.50	552.50	4-22-99	55.00	714.97	162.47
5	TELSTRA CP LTD GDR	2-08-99	114.00	570.00	4-22-99	105.00	524.98	(45.02)
14	AUTOLIV INC	8-11-98	33.19	464.61	4-26-99	34.50	482.98	18.37
21	COCA COLA FEMSA S A ADR	4-20-99	19.00	399.00	4-26-99	20.62	433.11	34.11
6	AT HOME CORPORATION	9-09-98	34.64	207.85	4-28-99	146.20	877.17	669.32
39	VOLKSWAGEN AG SPON ADR	12-21-98	15.50	604.50	4-28-99	14.20	553.78	(50.72)
22	DEUTSCHE LUFTHANSA AG ADR	4-26-99	23.88	525.25	4-30-99	22.87	503.23	(22.02)
5	DIXONS GRP PLC ADR	11-27-98	36.75	183.75	4-30-99	63.50	317.49	133.74
4	DIXONS GRP PLC ADR	12-09-98	37.67	150.67	4-30-99	63.50	253.99	103.32
19	MARUICO LTD ADR NEW	11-05-98	36.56	694.69	4-30-99	32.75	622.22	(72.47)
10	QWEST COMMUNICATIONS INTL INC	11-23-98	61.62	616.18	4-30-99	86.46	864.59	248.41
2	SONY CORP ADR 1974 NEW	9-01-98	74.49	148.98	5-03-99	92.25	184.49	35.51
9	GILAT SATELLITE NTWK LTD ORD	9-09-98	36.60	329.43	5-04-99	52.05	468.47	139.04
4	ARM HOLDINGS PLC ADS	6-16-98	10.09	40.38	5-04-99	33.72	134.89	94.51
17	NETCOM SYS AB SPONS ADR	10-19-98	35.13	597.13	5-06-99	30.13	512.19	(84.94)
34	ATI TECHNOLOGY	12-07-98	10.99	373.74	5-07-99	14.06	478.11	104.37
20	KROGER CO	11-18-98	56.45	1,129.09	5-10-99	51.02	1,020.40	(108.69)
40	ORACLE CORP	3-08-99	37.29	1,491.72	5-10-99	23.87	954.96	(536.76)
6	VALEO SPONSORED ADR	7-31-98	96.00	576.00	5-10-99	89.19	535.14	(40.86)
26	CERIDIAN CORPORATION	8-27-98	27.77	722.04	5-11-99	35.94	934.34	212.30
14	IXOS SOFTWARE AKTIENGESELLSHAF	10-08-98	20.20	282.77	5-12-99	38.28	535.85	253.08
17	PENINSULAR & OR STM NAV ADR	4-21-99	30.63	520.63	5-13-99	30.62	520.61	(.02)
20	FUJI PHOTO ADR NEW	4-19-99	38.63	772.50	5-17-99	34.51	690.12	(82.38)
19	INSTITUTO NATIONALE DELLE ADS	3-10-99	27.35	519.59	5-17-99	22.69	431.04	(88.55)

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108608 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	Purchase Information Date	Purchase Information Per Unit	Purchase Information Total Cost	Sale Information Date	Sale Information Per Unit	Sale Information Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
1	BP AMOCO PLC ADS	3-19-99	96.98	96.98	5-18-99	105.51	105.51	8.53
3	BP AMOCO PLC ADS	3-11-99	98.00	294.00	5-18-99	105.51	316.52	22.52
9	KONINKLIJKE AHOLD NV ADS	9-24-98	28.34	255.03	5-18-99	35.37	318.36	63.33
26	PEARSON PLC SP ADR	1-19-99	22.25	578.50	5-18-99	19.37	503.73	(74.77)
6	WOLTERS KLUWER NV SPON ADR	5-05-99	.00	.00	5-18-99	40.25	241.48	241.48
1	WOLTERS KLUWER NV SPON ADR	9-28-98	192.00	192.00	5-18-99	40.25	40.25	(151.75)
1	WOLTERS KLUWER NV SPON ADR	9-01-98	168.25	168.25	5-18-99	40.25	40.25	(128.00)
17	BANCO COMER PORTUGUES ADS	1-21-99	32.00	544.00	5-20-99	27.37	465.36	(78.64)
20	ENTERPR OIL PLC SPON ADR ORD	5-12-99	20.75	415.00	5-24-99	18.30	366.04	(48.96)
8	YAHOO INC	6-25-98	38.48	307.81	5-24-99	142.32	1,138.58	830.77
6	TELECOM ITALIA S.P.A	1-07-99	98.45	590.72	5-26-99	104.36	626.18	35.46
8	GLOBAL CROSSING LTD	12-10-98	19.57	156.53	5-27-99	46.31	370.48	213.95
11	ARACRUZ CELULOSE SA AMER NEW	3-22-99	13.96	153.59	5-27-99	19.63	215.96	62.37
16	CEMEX SA ADR FOR B SHS	3-23-99	7.13	114.00	5-27-99	9.02	144.26	30.26
0	ANGLO AMERICAN PLC ADR	6-07-99	.00	.00	6-07-99	.00	41.14	41.14
12	CANAL PLUS ADR	1-25-99	55.75	669.00	6-08-99	60.75	728.97	59.97
11	FOMENTO ECONOMICO MEXICANO	4-27-99	35.50	390.50	6-08-99	35.00	384.98	(5.52)
8	HANSON PLC SPON ADR NEW	5-07-99	49.50	395.98	6-10-99	44.95	359.59	(36.39)
10	METTLER TOLEDO INTL	6-30-98	20.00	200.00	6-11-99	26.50	264.99	64.99
1	FOMENTO ECONOMICO MEXICANO	4-27-99	35.50	35.50	6-16-99	36.12	36.12	.62
9	FOMENTO ECONOMICO MEXICANO	5-05-99	35.75	321.75	6-16-99	36.12	325.11	3.36
17	ROGERS COMM INC CL B (BC)	3-05-99	17.63	299.63	6-17-99	18.31	311.29	11.66
37	TELE NORTE LESTE PART SA ADR	1-19-99	11.99	443.81	6-17-99	19.12	707.60	263.79
5	KINGFISHER PLC SPN ADR	4-16-99	27.75	138.75	6-18-99	23.33	116.65	(22.10)
14	KINGFISHER PLC SPN ADR	10-07-98	19.15	268.16	6-18-99	23.33	326.63	58.47

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	Purchase Information Date	Purchase Information Per Unit	Purchase Information Total Cost	Sale Information Date	Sale Information Per Unit	Sale Information Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
36	QWEST COMMUNICATIONS INTL INC	11-23-98	20.81	749.11	6-18-99	37.58	1,352.89	603.78
41	WASHINGTON MUTUAL INC	1-19-99	41.25	1,691.25	6-18-99	36.12	1,481.08	(210.17)
16	KLM ROYAL DUTCH AIRLINES OLD	5-10-99	32.76	524.13	6-24-99	27.25	435.98	(88.15)
9	SCM MICROSYSTEMS	3-03-99	79.71	717.35	6-24-99	45.94	413.46	(303.89)
18	AFLAC INCORPORATED	9-29-98	30.18	543.23	6-28-99	46.12	830.22	286.99
4	AFLAC INCORPORATED	4-19-99	51.44	205.77	6-28-99	46.12	184.49	(21.28)
4	ROCHE HOLDINGS ADR	10-13-98	104.00	424.00	6-28-99	104.98	419.92	(4.08)
5	TELEFONICA DE ESPANA SA ADR	12-16-98	131.82	659.12	6-28-99	144.06	720.29	61.17
11	ESAT TELECOM GROUP PLC ADS	8-11-98	36.12	397.37	6-29-99	43.12	474.36	76.99
41	FRONTIER CORP	3-08-99	36.38	1,491.57	6-29-99	57.96	2,376.16	884.59
0	TELEFONICA DE ESPANA SA ADR	6-29-99	.00	.00	6-29-99	.00	21.07	21.07
0	LUCENT TECHNOLOGIES	6-30-99	.00	.00	6-30-99	.00	22.93	22.93
10	KONINKLIJKE AHOLD NV ADS	9-24-98	28.34	283.37	7-12-99	35.56	355.61	72.24
18	SWISSCOM AG	10-06-98	28.75	517.46	7-12-99	34.02	612.33	94.87
5	DIXONS GRP PLC ADR	2-01-99	52.50	262.50	7-13-99	61.50	307.49	44.99
3	DIXONS GRP PLC ADR	12-09-98	37.67	113.00	7-13-99	61.50	184.49	71.49
14	ING GROEP NV ADR	4-29-99	61.78	864.88	7-13-99	52.96	741.41	(123.47)
19	ATI TECHNOLOGY	12-07-98	10.99	208.86	7-14-99	15.37	292.12	83.26
62	BANCO SANTANDER CENT HISPAND	3-10-99	10.51	651.57	7-14-99	9.92	615.28	(36.29)
22	KOMATSU LTD SPON ADR NEW	5-04-99	24.25	533.50	7-14-99	25.62	563.73	30.23
17	KOMATSU LTD SPON ADR NEW	6-14-99	26.25	446.25	7-14-99	25.62	435.61	(10.64)
12	SOCIETE GENERALE SP ADR	3-12-99	35.38	424.50	7-15-99	34.50	413.98	(10.52)
6	SOCIETE GENERALE SP ADR	1-07-99	37.63	225.75	7-15-99	34.50	206.99	(18.76)
20	AT HOME CORPORATION	9-09-98	17.32	346.42	7-16-99	45.41	908.16	561.74
24	IMS HEALTH INC	1-19-99	36.50	876.00	7-16-99	30.53	732.73	(143.27)

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
26	MEDIAONE GROUP INC	3-08-99	57.38	1,491.75	7-16-99	74.37	1,933.62	441.87
38	SEAGATE TECHNOLOGY	11-18-98	30.94	1,175.63	7-16-99	26.65	1,012.69	(162.94)
1	MANNESMANN AG SP ADR	5-27-99	139.50	139.50	7-19-99	162.99	163.00	23.50
3	MANNESMANN AG SP ADR	3-17-99	133.00	399.00	7-19-99	162.99	488.98	89.98
43	PERUSAHAAN PERSERDAN INDONESIA	5-19-99	10.24	440.29	7-19-99	11.75	505.23	64.94
54	VIVENDI SPONSORED ADR	10-15-98	14.67	792.00	7-19-99	15.62	843.72	51.72
6	DAIMLER-CHRYSLER AG	10-13-98	77.45	464.72	7-20-99	87.12	522.73	58.01
17	HUTCHISON WHAMPOA ADR	10-12-98	32.47	551.92	7-21-99	46.50	790.47	238.55
8	SMITHKLINE PLC ADS 5	12-09-98	65.80	526.40	7-21-99	60.25	482.00	(44.40)
27	BRITISH AMER TOB SPON ADR	5-27-99	19.25	519.75	7-23-99	16.75	452.23	(67.52)
36	ISPAT INTL N.V.	4-26-99	11.87	427.39	7-23-99	11.37	409.48	(17.91)
30	CAPITAL ONE FINANCIAL CORP	10-20-98	31.67	950.00	8-02-99	47.13	1,413.84	463.84
44	CEMEX SA ADR FOR B SHS	3-23-99	7.13	313.50	8-02-99	8.37	368.68	54.98
7	TELEFONOS DE MX SA DE CV ADR	7-15-99	81.64	571.50	8-02-99	74.12	518.86	(52.64)
10	IXOS SOFTWARE AKTIENGESELLSHAF	10-08-98	20.20	201.98	8-04-99	30.09	300.86	98.88
9	AMERICA ONLINE INC	7-16-99	121.91	1,097.20	8-05-99	80.12	721.10	(376.10)
10	AMERICA ONLINE INC	6-11-99	100.50	1,005.00	8-05-99	80.12	801.22	(203.78)
4	HONDA MOTOR COMPANY LTD ADR	3-02-99	74.88	299.50	8-05-99	82.15	328.59	29.09
108	NEW WORLD DEV CO LTD SPON ADR	5-20-99	5.23	564.85	8-05-99	5.12	553.48	(11.37)
3	PERUSAHAAN PERSERDAN INDONESIA	8-05-99	.00	.00	8-06-99	9.25	27.74	27.74
68	CITY DEV LTD SPON ADR	5-07-99	6.93	471.41	8-09-99	6.37	433.48	(37.93)
6	HONDA MOTOR COMPANY LTD ADR	4-01-99	92.23	553.36	8-10-99	83.00	497.98	(55.38)
3	HONDA MOTOR COMPANY LTD ADR	3-02-99	74.88	224.63	8-10-99	83.00	248.99	24.36
9	TELEWEST COMMUNICATIONS PLC ADR	1-07-99	33.63	302.63	8-10-99	34.37	309.36	6.73
8	PERUSAHAAN PERSERDAN INDONESIA	8-11-99	.00	.00	8-11-99	.00	3.96	3.96

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II

1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT

MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
4	TLC LASER EYE CENTERS INC	5-21-99	48.64	194.55	8-11-99	30.37	121.50	(73.05
12	TLC LASER EYE CENTERS INC	5-14-99	45.27	543.21	8-11-99	30.37	364.48	(178.73
2	BARCLAYS PLC ADR	2-25-99	110.97	221.93	8-13-99	117.97	235.94	14.01
2	BARCLAYS PLC ADR	2-15-99	105.58	211.16	8-13-99	117.97	235.93	24.77
4	FUJITSU LTD ADR NEW	11-02-98	55.50	222.00	8-13-99	144.00	575.98	353.98
4	FUJITSU LTD ADR NEW	10-23-98	53.75	215.00	8-13-99	144.00	575.98	360.98
12	HSBC HOLDINGS PLC SPON ADR NEW	10-12-98	34.83	418.00	8-17-99	60.51	726.08	308.08
13	KOREA TELECOM	5-27-99	30.48	396.27	8-18-99	33.04	429.50	33.23
9	EQUANT N.V.	2-03-99	82.50	742.50	8-19-99	79.25	713.22	(29.28
8	UTD PAN-EUROPE COMM NV SP AD A	7-26-99	65.00	520.00	8-19-99	58.00	464.03	(55.97
3	BRIDGESTONE CP ADR	4-19-99	265.00	795.00	8-23-99	279.99	839.97	44.97
1	BRIDGESTONE CP ADR	6-10-99	294.00	294.00	8-23-99	279.99	279.99	(14.01
13	GRUPO TELEVISA S.A.GLOBAL DEP	5-03-99	41.37	537.75	8-25-99	38.25	497.23	(40.52
13	TALISMAN ENERGY INC	3-30-99	22.50	292.50	8-25-99	30.07	390.88	98.38
2	BP AMOCO PLC ADS	3-19-99	96.98	193.96	9-01-99	112.75	225.49	31.53
149	BLUE CIRCLE INDUSTRIES ADR	8-06-99	7.47	1,112.48	9-01-99	7.06	1,052.27	(60.21
10	SCHLUMBERGER LTD	4-28-99	62.69	626.88	9-01-99	65.81	658.10	31.22
8	COFLEXIP SPONSORED ADR	5-07-99	43.07	344.52	9-02-99	45.02	360.20	15.68
1	COFLEXIP SPONSORED ADR	8-10-99	46.74	46.74	9-02-99	45.02	45.02	(1.72
5	AMAZON COM INC	7-16-99	137.68	688.40	9-07-99	63.51	317.54	(370.86
10	D S M NV SPONS ADR	8-06-99	34.50	345.00	9-07-99	29.67	296.71	(48.29
2	GENENTECH INC	8-02-99	148.00	296.00	9-07-99	170.12	340.23	44.23
2	MODERN TIMES GP MTG AB ADR	2-10-99	76.00	152.00	9-07-99	150.00	299.99	147.99
12	RAINIER BANCORP OLD	7-15-99	19.44	233.25	9-07-99	17.50	209.99	(23.26
7	ANGLO AMERICAN PLC ADR	4-20-99	56.29	394.00	9-08-99	55.60	389.23	(4.77

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
21	SVENSKA CELLULOSA B SP ADR	4-22-99	24.94	523.80	9-13-99	28.75	603.72	79.92
7	TOTAL FINA SA ADS	10-12-98	59.00	413.00	9-16-99	65.00	454.98	41.98
18	CANON INC ADR NEW	7-07-99	29.25	526.50	9-17-99	28.50	512.98	(13.52)
32	RAINIER BANCORP OLD	7-15-99	19.44	622.00	9-22-99	16.57	530.21	(91.79)
20	SUN MICROSYSTEMS INC	10-15-98	23.81	476.25	9-22-99	91.26	1,825.17	1,348.92
28	TAIWAN SMCNDCTR MFG CO LTD ADR	11-18-98	13.25	371.04	9-22-99	30.00	839.97	468.93
14	RESEARCH IN MOTION	2-09-99	10.62	148.63	9-23-99	29.62	414.73	266.10
35	BANK OF TOKYO-MITSUBISHI LTD	11-04-98	10.81	378.44	9-27-99	15.12	529.36	150.92
15	AMERICAN INTERNATIONAL GP	11-23-98	80.66	1,209.97	9-29-99	86.00	1,289.95	79.98
18	CIGNA CP	3-17-99	79.81	1,436.63	9-29-99	87.00	1,565.94	129.31
43	NINTENDO CO LTD ADR NEW	5-19-99	14.38	618.13	9-29-99	19.12	822.35	204.22
25	FOREST LABORATORIES	11-23-98	46.75	1,168.67	9-30-99	42.00	1,049.96	(118.71)
14	FOREST LABORATORIES	7-16-99	49.75	696.50	9-30-99	42.00	587.98	(108.52)
7	FOREST LABORATORIES	5-24-99	50.00	350.00	9-30-99	42.00	293.99	(56.01)
14	GLOBAL TELESYSTEM GP INC	12-10-98	25.97	363.56	9-30-99	20.07	280.94	(82.62)
23	PRIMACOM AG SPON ADR	3-23-99	17.75	408.25	10-04-99	27.25	626.72	218.47
7	COMPUTER SCIENCES CP	5-25-99	64.04	448.26	10-05-99	63.43	444.03	(4.23)
0	SBC COMMUNICATIONS	10-13-99	.00	.00	10-13-99	.00	45.23	45.23
36	ABITIBI CONSOLIDATED INC	5-10-99	11.69	420.75	10-15-99	11.75	422.98	2.23
48	ABITIBI CONSOLIDATED INC	7-15-99	12.25	588.00	10-15-99	11.75	563.98	(24.02)
16	CRH PLC ADR	3-05-99	18.63	298.00	10-15-99	19.62	313.99	15.99
12	CRH PLC ADR	4-20-99	20.25	243.00	10-15-99	19.62	235.49	(7.51)
12	CRH PLC ADR	3-19-99	18.63	223.50	10-15-99	19.62	235.49	11.99
3	FUJITSU LTD ADR NEW	4-19-99	81.75	245.25	10-15-99	139.75	419.24	173.99
2	FUJITSU LTD ADR NEW	11-02-98	55.50	111.00	10-15-99	139.75	279.49	168.49

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
26	ALCATEL ADS	7-20-99	27.53	715.67	10-18-99	27.00	701.97	(13.70)
13	HITACHI 10 COM NEW ADR	7-15-99	108.88	1,415.41	10-21-99	98.00	1,273.95	(141.46)
6	SAP AKTIENGESELLSCHAFT ADS	10-04-99	38.38	230.25	10-22-99	34.62	207.74	(22.51)
18	SAP AKTIENGESELLSCHAFT ADS	9-10-99	38.89	699.94	10-22-99	34.62	623.23	(76.71)
1	ORANGE PLC ADR	9-30-99	99.06	99.06	10-25-99	116.81	116.81	17.75
7	ORANGE PLC ADR	9-10-99	90.93	636.51	10-25-99	116.81	817.64	181.13
25	PECHINEY	7-02-99	22.71	567.66	11-01-99	29.00	724.97	157.31
7	PECHINEY	8-10-99	27.71	193.94	11-01-99	29.00	202.99	9.05
15	BROKEN HILL PROP LTD ADR SPNSR	7-09-99	25.00	375.00	11-03-99	20.46	306.94	(68.06)
19	BROKEN HILL PROP LTD ADR SPNSR	4-20-99	21.25	403.74	11-03-99	20.46	388.80	(14.94)
12	COFLEXIP SPONSORED ADR	8-10-99	46.74	560.90	11-04-99	36.00	431.98	(128.92)
5	COFLEXIP SPONSORED ADR	9-30-99	47.68	238.42	11-04-99	36.00	179.99	(58.43)
34	CORUS GROUP PLC ADS	8-10-99	28.09	955.15	11-04-99	18.81	639.60	(315.55)
21	BARRICK GOLD CORP	10-19-99	19.79	415.68	11-09-99	17.61	369.87	(45.81)
15	BASF AG NEW ADR	8-05-99	47.57	713.50	11-19-99	45.07	676.01	(37.49)
69	D S M NV SPONS ADR	8-06-99	11.50	793.50	11-19-99	9.30	641.90	(151.60)
11	INFINITY BROADCASTING CP A NEW	3-08-99	24.00	264.00	11-30-99	37.57	413.30	149.30
24	ORACLE CORP	6-21-99	34.77	834.55	11-30-99	70.39	1,689.24	854.69
14	UNILEVER PLC (NEW) ADS	9-28-99	39.21	548.90	12-03-99	29.79	416.99	(131.91)
5	VEBA AKTIENGELLSCHAFT	9-30-99	56.05	280.25	12-07-99	47.00	234.99	(45.26)
9	VEBA AKTIENGELLSCHAFT	6-04-99	57.32	515.87	12-07-99	47.00	422.98	(92.89)
4	BARCLAYS PLC ADR	2-25-99	110.97	443.87	12-08-99	106.00	423.98	(19.89)
6	DAIWA HOUSE IND LTD ADR	10-19-99	95.00	570.00	12-09-99	84.26	505.54	(64.46)
11	DAYTON HUDSON CORP	7-16-99	69.88	768.63	12-09-99	67.44	741.79	(26.84)
22	DAYTON HUDSON CORP	3-08-99	68.25	1,501.50	12-09-99	67.44	1,483.57	(17.93)

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
17	JOHNSON & JOHNSON	8-17-99	97.63	1,659.63	12-09-99	92.50	1,572.44	(87.19)
4	JOHNSON & JOHNSON	9-30-99	92.44	369.75	12-09-99	92.50	369.99	.24
5	OJI PPR LTD ADR	9-30-99	71.65	358.27	12-09-99	62.00	309.99	(48.28)
9	OJI PPR LTD ADR	9-13-99	77.00	693.00	12-09-99	62.00	557.98	(135.02)
22	TYCO INTERNATIONAL LTD NEW	7-16-99	49.69	1,093.13	12-09-99	26.90	591.89	(501.24)
22	WELLPOINT HLTH NET INC NEW	9-07-99	73.69	1,621.24	12-09-99	59.12	1,300.70	(320.54)
10	POHANG IRON & STEEL CO. LTD	7-20-99	34.96	349.59	12-13-99	35.53	355.30	5.71
14	POHANG IRON & STEEL CO. LTD	4-30-99	25.75	360.50	12-13-99	35.53	497.41	136.91
4	CELESTICA INC SUB VTG SHS	5-20-99	43.61	174.45	12-15-99	79.21	316.83	142.38
10	CELESTICA INC SUB VTG SHS	1-20-99	33.44	334.38	12-15-99	79.21	792.09	457.71
1	TALISMAN ENERGY INC	4-21-99	25.47	25.47	12-15-99	23.75	23.75	(1.72)
9	TALISMAN ENERGY INC	3-30-99	22.50	202.50	12-15-99	23.75	213.74	11.24
12	TALISMAN ENERGY INC	7-16-99	29.50	354.00	12-15-99	23.75	284.99	(69.01)
18	RESEARCH IN MOTION	2-09-99	10.62	191.09	12-16-99	42.51	765.18	574.09
6	SONERA CORP ADS	10-13-99	26.73	160.40	12-17-99	50.16	300.96	140.56
12	SGL CARBON ADR	8-11-99	28.00	336.00	12-20-99	22.06	264.77	(71.23)
31	SGL CARBON ADR	7-26-99	27.50	852.50	12-20-99	22.06	683.88	(168.51)
	TOTAL SHORT-TERM GAIN							22,527.32
	TOTAL SHORT-TERM LOSS							(10,081.64)
	TOTAL SHORT-TERM			124,755.20			137,200.88	12,445.68

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DATES (05-07) Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC. Information contained herein is based on data obtained from recognized statistical services, issuer reports or communications, or other sources believed to be reliable. However, we cannot make any representation as to its accuracy or completeness. Any statements non-factual in nature constitute only current opinions, which are subject to change.

MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II

1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT

MR PEAR/MR HANDO 022

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
LONG-TERM GAIN/(LOSS) TRANSACTIONS								
16	CONTINENTIAL ALNS INC CL B	5-05-97	31.96	511.37	1-04-99	34.00	543.98	32.61
25	BMC SOFTWARE	9-08-97	36.25	856.25	1-05-99	42.40	1,060.02	203.77
5	BRIDGESTONE CP ADR	12-18-95	150.50	752.50	1-05-99	205.99	1,029.96	277.46
5	BENCKISER NV CLASS B	1-05-98	40.25	201.25	1-11-99	70.03	350.16	148.91
1	BENCKISER NV CLASS B	12-10-97	36.02	36.02	1-11-99	70.03	70.03	34.01
9	GROUPE DANONE SPONSORED ADR	11-20-97	31.00	279.00	1-27-99	53.00	477.02	198.02
9	NOKIA CP ADR	9-16-97	41.94	377.44	2-03-99	136.49	1,228.45	851.01
12	DASSAULT SYSTEMS SA ADS	12-26-97	29.00	348.00	2-12-99	40.92	491.04	143.04
12	DASSAULT SYSTEMS SA ADS	9-25-97	31.63	379.50	2-12-99	40.92	491.04	111.54
24	COMPUWARE CORP	7-26-96	10.00	240.00	2-18-99	56.58	1,357.88	1,117.88
5	COLT TELECOM GROUP PLC ADR	11-21-97	9.90	49.51	2-19-99	75.81	379.03	329.52
2	TELE DANMARK A/S ADS	12-17-97	32.37	64.74	3-01-99	59.01	118.01	53.27
31	BLYTH INDUSTRIES INC	12-29-97	28.00	867.97	3-08-99	25.90	803.00	(64.97)
18	HEALTH MGMT ASSOC CL A	2-26-96	9.17	165.07	3-08-99	13.12	236.24	71.17
9	TELE DANMARK A/S ADS	12-17-97	32.37	291.35	3-12-99	52.12	469.07	177.72
3	ELAN PLC ADR	1-28-98	50.00	150.00	3-15-99	82.02	246.06	96.06
82	DARDEN RESTAURANTS	11-14-97	11.06	907.13	3-26-99	20.42	1,674.36	767.23
27	METTLER TOLEDO INTL	12-09-97	18.06	487.70	4-06-99	23.59	637.00	149.30
8	TELE DANMARK A/S ADS	12-17-97	32.37	258.98	4-21-99	51.16	409.24	150.26
5	SONY CORP ADR 1974 NEW	6-07-96	63.88	319.38	5-03-99	92.25	461.23	141.85
4	SONY CORP ADR 1974 NEW	5-24-96	64.21	256.85	5-03-99	92.25	368.99	112.14
4	ARM HOLDINGS PLC ADS	4-22-98	10.56	42.25	5-04-99	33.72	134.88	92.63
12	METTLER TOLEDO INTL	12-09-97	18.06	216.75	6-11-99	26.50	317.99	101.24
2	TELEFONICA DE ESPANA SA ADR	1-28-98	99.75	199.50	6-28-99	144.06	288.11	88.61
3	MANNESMANN AG SP ADR	4-22-98	79.20	237.60	7-19-99	162.99	488.98	251.38

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAMALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

Quantity	Security Description	Purchase Information Date	Per Unit	Total Cost	Sale Information Date	Per Unit	Proceeds	Realized Gain or (Loss)
LONG-TERM GAIN/(LOSS) TRANSACTIONS								
2	VODAFONE AIR TOUCH PUB LTD	4-28-98	103.31	206.62	8-17-99	191.93	383.86	177.24
1	VODAFONE AIR TOUCH PUB LTD	4-02-98	104.93	104.93	8-17-99	191.93	191.93	87.00
20	TOMRA SYS A/S ADR NEW	7-10-96	10.88	217.50	8-23-99	32.87	657.47	439.97
2	TOMRA SYS A/S ADR NEW	4-18-96	9.00	18.00	8-23-99	32.87	65.75	47.75
1	VODAFONE AIR TOUCH PUB LTD	4-28-98	103.31	103.31	9-10-99	194.12	194.12	90.81
50	OLYMPUS OPTICAL SPON ADR	9-24-98	10.88	543.75	9-29-99	13.12	656.22	112.47
18	COMPUTER SCIENCES CP	9-01-98	56.52	1,017.33	10-05-99	63.43	1,141.78	124.45
5	KAO CORP ADR	9-01-98	163.69	818.44	10-15-99	256.02	1,280.12	461.68
10	VODAFONE AIR TOUCH PUB LTD	4-28-98	20.66	206.63	10-20-99	42.40	424.00	217.37
5	AMGEN INC	9-01-98	14.55	72.73	11-30-99	46.56	232.80	160.07
8	CISCO SYS INC	11-18-98	36.38	291.00	11-30-99	91.43	731.47	440.47
6	SUN MICROSYSTEMS INC	10-15-98	23.81	142.88	11-30-99	139.64	837.82	694.94
5	ARM HOLDINGS PLC ADS	6-16-98	10.09	50.47	12-07-99	165.85	829.27	778.80
24	TYCO INTERNATIONAL LTD NEW	9-01-98	27.47	659.25	12-09-99	26.90	645.69	(13.56)
3	GROUPE DANONE SPONSORED ADR	12-22-97	36.36	109.07	12-16-99	44.79	134.36	25.29
7	GROUPE DANONE SPONSORED ADR	11-20-97	31.08	217.00	12-16-99	44.79	313.51	96.51
12	ASM LITHOGRAPHY HLDG NV ORD	12-01-98	24.75	321.00	12-17-99	98.00	1,175.96	854.96
18	BED BATH & BEYOND INC	1-26-96	9.83	176.90	12-20-99	31.30	563.34	386.44
20	BED BATH & BEYOND INC	5-20-98	24.95	498.93	12-20-99	31.30	625.94	127.01
27	BURLINGTON RESOURCES INC	10-26-98	39.17	1,057.65	12-20-99	31.69	855.53	(202.12)
40	WILLIAMS CO INC	11-23-98	29.39	1,175.59	12-21-99	28.87	1,154.96	(20.63)
	TOTAL ALL LONG-TERM GAIN							11,023.86
	TOTAL ALL LONG-TERM LOSS							(301.28)
	TOTAL ALL LONG-TERM			16,505.09			27,227.67	10,722.58
	TOTAL ACCOUNT GAIN/(LOSS)			141,260.29			164,428.55	23,168.26

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Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC. Information contained herein is based on data obtained from recognized statistical services, issuer reports or communications, or other sources believed to be reliable. However, we cannot make any representation as to its accuracy or completeness. Any statement nonfactual in nature constitutes only current opinions, which are subject to change.

MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-108600 NICK JOE RAHALL II 1-01-99 THRU 12-31-99

NICHOLAS-APPLEGATE CAPITAL MGMT MR PEAR/MR HANDO 022

		PURCHASE INFORMATION			SALE INFORMATION			
Quantity	Security Description	Date	Per Unit	Total Cost	Date	Per Unit	Proceeds	Realized Gain or (Loss)

This Capital Gains Schedule is not an official tax document. It is provided for informational purposes only.

D 14

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT
FOR YEAR ENDING DECEMBER 31, 1999

Your Financial Advisor
MR PEAR/MR HANDO
MORGAN STANLEY DEAN WITTER
1775 EYE STREET, NW SUITE 200
WASHINGTON, DC 20006
(202) 862-9000

Account Number FA
642 113487 022

AAA Customer Service
1-800-869-3326

THE HONORABLE NICK JOE RAHALL II 002843
ACCESS #2-LAZARO FRERES
PRIVATE & CONFIDENTIAL 642
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

Asset Summary

	Value	% of Assets
Money Market Funds	$5,632.54	5.1%
Stocks	110,535.57	96.9
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$114,168.11	100.0%
Cash	10.53	
Total Asset Value	$114,178.64	

Income Summary

	Year To Date
Money Market Funds	$127.44
Stocks	2,503.73
Municipal Bonds	0.00
Corporate Fixed Income	0.00
Government Securities	0.00
Mutual Funds	0.00
Unit Investment Trusts	0.00
Certificates of Deposit	0.00
Other	0.00
Total Income	$2,631.17
Taxable Income	$2,631.17
Tax Exempt Income	$0.00

Activity Summary

Total Asset Value January 01, 1999		$119,721.22
Cash/Money Market Activity for 1999		
Credits To Your Account		
Dividend and Interest	2,631.17	
Deposits	0.00	
Sales Proceeds/Redemptions	31,656.15	
Other Credits	65.55	
Total Credits	34,352.87	
Debits To Your Account		
Checking	0.00	
Debit Card	0.00	
Withdrawals	-19,000.00	
Funds to Purchase Securities	-12,427.61	
Other Debits	-2,923.90	
Total Debits	-34,351.51	
Changes in Asset Value for 1999		
Value of Priced Assets 1/01/99	$115,632.08	
Securities Bought	12,427.61	
Securities Received	0.00	
Securities Sold/Redeemed	-31,656.15	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	13,932.03	
Value of Priced Assets 12/31/99	110,535.57	
Net Change in Asset Value		-5,996.51
Total Asset Value as of December 31,1999		$114,178.64

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number FA
642 113487 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	10.53	---	---
ACTIVE ASSETS MONEY TRUST	3,632.54	3.1%	195
Total Cash and Money Market Funds	03,643.07	3.1%	0195
Net Change Since January 1, 1999	-198.64		

Annualized 30 Day Yields	
Active Assets Money Trust	5.39%
Active Assets Govt. Sec. Tr.	5.03%
Active Assets California Tax Free	2.76%
Active Assets Tax Free Trust	3.22%
Active Assets Insured Account	4.80%
Active Assets Deposit Account	4.80%

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
165	ABN AMRO HLDGS N V	25 5/16	4,176.56	3.7%	86	2.07%	ABN	Next Dividend Payable 03/00
120	ALCATEL ADS	45	5,400.00	4.7%	42	.77%	ALA	Next Dividend Payable 07/00
70	ALLIED ZURICH PLC LEVEL I ADR	23 5/8	1,653.75	1.4%	28	1.74%	ADZHY	
71	ASTRAZENECA PLC ADS	41 3/4	2,964.25	2.6%	48	1.61%	AZN	Next Dividend Payable 04/00
108	AVENTIS ADS	54 7/8	6,142.50	5.4%	51	.84%	AVE	
33	BANK OF AMERICA CORP	50 3/16	1,656.18	1.5%	66	3.98%	BAC	Next Dividend Payable 03/00
60	CADBURY SCHW PLC ADR 10 ORD NW	24 3/16	1,451.25	1.3%	37	2.55%	CSG	
55	CITIGROUP INC	55 11/16	3,062.81	2.7%	30	1.00%	C	Next Dividend Payable 02/00
25	DAIMLER-CHRYSLER AG	78	1,950.00	1.7%	62	3.20%	DCX	
30	DEUTSCHE BANK AG SP ADR	84	2,520.00	2.2%	25	1.02%	DTBKY	Next Dividend Payable 05/00
43	DIAGEO PLC SPON ADR NEW	32	1,376.00	1.2%	54	3.92%	DEO	Next Dividend Payable 05/00
43	DU PONT EI DE NEMOURS & CO	65 7/8	2,832.62	2.5%	60	2.12%	DD	Next Dividend Payable 03/00
110	ENDESA SA ADS	20 3/16	2,220.62	1.9%	45	2.07%	ELE	Next Dividend Payable 01/28/00
35	ENI SPA AMER DEP RCPT	55 1/8	1,929.37	1.7%	40	2.11%	E	
24	EXXON MOBIL CORP	80 9/16	2,094.62	1.8%	45	2.18%	XOM	
30	FANNIE MAE	62 7/16	1,873.12	1.6%	32	1.72%	FNM	Next Dividend Payable 02/00
30	GENERAL ELECTRIC CO	154 3/4	4,642.50	4.1%	49	1.05%	GE	Next Dividend Payable 01/25/00
21	HEINEKEN NV ADR	48 1/2	1,018.50	0.9%	4	.46%	HINKY	Next Dividend Payable 04/00
30	HSBC HOLDINGS PLC SPON ADR NEW	71 3/8	2,141.25	1.9%	47	2.22%	HBC	Next Dividend Payable 04/00
35	INTL BUSINESS MACHINES CORP	107 7/8	3,775.62	3.3%	16	.42%	IBM	Next Dividend Payable 03/00
30	JOHNSON & JOHNSON	93 1/4	2,797.50	2.5%	33	1.20%	JNJ	Next Dividend Payable 03/00
7	KAO CORP ADR	284 3/4	1,995.25	1.7%	9	.47%	KAOCY	Next Dividend Payable 06/00
15	MANNESMANN AG SP ADR	240	3,600.00	3.2%	6	.19%	MNNSY	Next Dividend Payable 06/00
220	MARCONI PLC SP ADR	17 5/8	3,877.50	3.4%	46	1.19%	MCONY	Next Dividend Payable 02/22/00
35	MERCK & CO	67 3/16	2,351.56	2.1%	40	1.72%	MRK	Next Dividend Payable 01/03/00
52	NATIONAL POWER PLC ADS	21 1/2	1,118.00	1.0%	80	7.20%	NP	Next Dividend Payable 01/24/00
50	NESTLE SPON ADR REP REG SHR	91	4,550.00	4.0%	52	1.16%	NSRGY	Next Dividend Payable 06/00
37	NOVARTIS AG ADR	73	2,701.00	2.4%	29	1.10%	NVTSY	Next Dividend Payable 05/00
20	PROCTER & GAMBLE	109 9/16	2,191.25	1.9%	25	1.16%	PG	Next Dividend Payable 02/00
50	RICOH LTD ADR	94	4,700.00	4.1%	19	.41%	RICOY	Next Dividend Payable 06/00

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number FA
642 113487 022

Stocks			Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks									
38	ROYAL DUTCH PETE NY 1.25 GU	60	9/16	2,301.37	2.0%	51	2.22%	RD	Next Dividend Payable 03/00
59	SBC COMMUNICATIONS	48	3/4	2,876.25	2.5%	57	2.00%	SBC	Next Dividend Payable 02/00
30	SMITHKLINE PLC ADS 5	64	1/8	1,923.75	1.7%	27	1.40%	SBH	Next Dividend Payable 03/00
75	SOCIETE GENERALE SP ADR	46	1/4	3,468.75	3.0%	49	1.43%	SCGLY	
18	SONY CORP ADR 1974 NEW	284	3/4	5,125.50	4.5%	7	.14%	SNE	Next Dividend Payable 06/00
68	TOTAL FINA SA ADS	69	1/4	4,709.00	4.1%	58	1.24%	TOT	
80	UNILEVER PLC (NEW) ADS	30	1/4	2,420.00	2.1%	59	2.46%	UL	Next Dividend Payable 06/00
145	VIVENDI SPONSORED ADR	17	7/8	2,949.37	2.6%	78	2.66%	VVOIY	
Total Stocks				$110,535.57	96.9%	$1,612	1.45%		
Net Change Since January 1, 1999				-5,096.51					

Asset Summary	Value	Est Yrly Income
Total Asset Value	$114,178.64	$1,607
Total Net Change In Priced Assets Since January 1, 1999	-5,096.51	

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Activity	Description	Amount	Income Category
Dividend	ACTIVE ASSETS MONEY TRUST	127.44	Money Market Funds
Dividend	ABN AMRO HLDGS N V	85.80	Stocks
Dividend	ALCATEL ADS	49.40	Stocks
Dividend	ALLIED DOMECQ PLC ADR SPON	153.04	Stocks
Dividend	ALLIED ZURICH PLC LEVEL I ADR	28.87	Stocks
Dividend	AMERITECH CORP	61.92	Stocks
Dividend	ASTRAZENECA PLC ADS	53.33	Stocks
Dividend	BANK OF AMERICA CORP	44.20	Stocks
Dividend	BANKAMERICA CORP NEW	14.85	Stocks
Dividend	CADBURY SCHW PLC ADR 10 ORD NW	42.78	Stocks
Dividend	CITIGROUP INC	35.23	Stocks
Dividend	DAIMLER-CHRYSLER AG ADR	42.58	Stocks
Dividend	DEUTSCHE BANK AG SP ADR	25.74	Stocks
Dividend	DIAGEO PLC SPON ADR NEW	60.07	Stocks

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MORGAN STANLEY DEAN WITTER

1099-DIV

STATEMENT FOR TAX YEAR 1999

OMB NO.
1545-0110

CORRECTED
02/16/00

Account Number FA
642 113487 022

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES 002434
PRIVATE & CONFIDENTIAL
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

Social Security Number
236-78-8645

FA Phone Number
(202) 862-9000

DIVIDENDS AND DISTRIBUTIONS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

The following dividend information is reported to the IRS by payer. When preparing your income tax return you should list payer information separately as shown below.

Payer	1. Ordinary Dividends	2a. Total Capital Gain Distributions	2b. 28% Gain Distributions	2c. Section 1250 Gain Distributions	3. Non-Taxable Distributions	4. Federal Income Tax Withheld	6. Foreign Tax Paid
DEAN WITTER REYNOLDS INC. PAYER'S FED. ID. # 94-1671384	2,503.73	0.00	0.00	0.00	0.00	0.00	247.43
ACTIVE ASSETS MONEY TRUST PAYER'S FED. ID. # 13-3075085 PLAN NUMBER 260-014981854	127.44	0.00	0.00	0.00	0.00	0.00	0.00

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number 642 113487 FA 022

DETAIL OF DIVIDENDS AND DISTRIBUTIONS

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
ABN AMRO HLDGS N V							
06/07/99	43.12						
09/17/99	42.68						
ALCATEL ADS							
07/23/99	49.40						7.41
ALLIED DOMECQ PLC ADR SPON							
03/01/99	78.13						11.72
04/12/99	74.91						11.24
ALLIED ZURICH PLC LEVEL I ADR							
06/23/99	28.87						
AMERITECH CORP							
02/01/99	19.05						
05/03/99	14.29						
08/02/99	14.29						
11/01/99	14.29						
ASTRAZENECA PLC ADS							
04/28/99	35.19						3.52
10/25/99	18.14						1.81
BANK OF AMERICA CORP							
06/25/99	14.85						
09/24/99	14.85						
12/23/99	16.50						
BANKAMERICA CORP NEW							
03/26/99	14.85						
CADBURY SCHW PLC ADR 10 ORD NW							
05/28/99	29.67						4.45
11/29/99	13.11						1.31
CITIGROUP INC							
02/26/99	12.66						
05/28/99	7.77						
08/27/99	7.70						
11/24/99	7.70						
DAIMLER-CHRYSLER AG							
05/19/99	62.58						6.26
DEUTSCHE BANK AG SP ADR							
05/28/99	25.76						
DIAGEO PLC SPON ADR NEW							
05/07/99	23.96						2.40

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number FA
642 113487 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
DIAGEO PLC SPON ADR NEW							
11/19/99	36.11						3.61
DU PONT EI DE NEMOURS & CO							
03/11/99	15.05						
06/12/99	15.05						
09/11/99	15.05						
12/14/99	15.05						
ELF AQUITAINE SPON ADR							
07/11/99	55.41						8.31
ENDESA SA ADS							
01/28/99	55.23						8.81
05/27/99	1.40						0.35
07/28/99	37.51						9.38
ENI SPA AMER DEP RCPT							
07/07/99	56.00						15.12
GEN ELEC PLC ADR							
04/21/99	24.27						2.43
09/07/99	32.02						3.20
GENERAL ELECTRIC CO							
01/25/99	10.50						
04/26/99	10.50						
07/26/99	10.50						
10/25/99	10.50						
HEINEKEN NV ADR							
05/27/99	3.72						0.56
10/08/99	2.21						
HOECHST AKTIENGESELLSHAFT							
05/14/99	37.16						9.88
HSBC HLDG PLC SPND ADR NEW							
04/28/99	32.65						4.90
HSBC HOLDINGS PLC SPON ADR NEW							
10/07/99	22.17						2.22
INTL BUSINESS MACHINES CORP							
03/10/99	4.40						
06/10/99	2.40						
09/10/99	2.40						
12/10/99	4.20						
JOHNSON & JOHNSON							
03/09/99	10.00						

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number 642 113487 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
JOHNSON & JOHNSON							
06/08/99	8.40						
09/07/99	8.40						
12/07/99	8.40						
KAO CORP ADR							
12/16/99	6.64						1.00
LOCKHEED MARTIN CORP							
03/31/99	8.80						
06/30/99	8.80						
09/30/99	8.80						
MANNESMANN AG SP ADR							
06/18/99	7.00						
MERCK & CO							
01/04/99	13.50						
04/01/99	13.50						
07/01/99	9.45						
10/01/99	10.15						
MOBIL CORP DELAWARE							
03/10/99	11.40						
06/10/99	11.40						
09/10/99	11.40						
12/10/99	11.40						
NATIONAL POWER PLC ADS							
04/16/99	37.24						5.59
08/09/99	49.63						6.96
NESTLE SPON ADR REP REG SHR							
06/28/99	62.11						9.32
NOVARTIS AG ADR							
05/26/99	35.25						5.29
PHILIP MORRIS CO INC							
01/11/99	31.68						
04/12/99	31.68						
07/12/99	31.68						
10/12/99	34.56						
RHONE-POULENC AMER DEPOSIT SHS							
06/15/99	47.91						7.19
RICOH LTD ADR							
07/12/99	10.46						1.57
12/20/99	12.39						1.86

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number 942 113487 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
ROYAL DUTCH PETE NY 1.25 GU							
05/24/99	33.62						5.04
09/29/99	26.36						3.95
SEARS ROEBUCK & CO							
01/04/99	6.90						
04/01/99	6.90						
07/01/99	6.90						
10/01/99	6.90						
SMITHKLINE PLC ADS 5							
07/15/99	7.24						0.72
10/15/99	7.02						0.70
SOCIETE GENERALE SP ADR							
06/22/99	49.88						
SONY CORP ADR 1974 NEW							
07/08/99	4.76						1.01
12/06/99	7.93						1.19
UNILEVER PLC (NEW) ADS							
12/29/99	22.34						2.24
UNILEVER PLC AMER SHARES OLD							
06/01/99	52.26						7.84
06/16/99	447.67						67.15
VIVENDI SPONSORED ADR							
06/04/99	26.16						
06/16/99	41.66						
Total	2,883.73	0.00	0.00	0.00	0.00	0.00	247.43
ACTIVE ASSETS MONEY TRUST							
1999	127.44						
Total	127.44	0.00	0.00	0.00	0.00	0.00	0.00

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-113487 NICX JOE RAHALL II 1-01-99 THRU 12-31-9

LAZARD FRERES ASSET MGMT MR PEAR/MR HANDO 02

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
10	JOHNSON & JOHNSON	10-14-98	79.35	793.49	4-08-99	94.75	947.46	153.9
0	ASTRAZENECA PLC ADS	4-09-99	.00	.00	4-09-99	.00	6.09	6.0
15	MERCK & CO	10-16-98	67.44	1,011.56	4-13-99	84.43	1,266.51	254.9
0	DEUTSCHE BANK AG SP ADR	5-05-99	.00	.00	5-03-99	.00	35.00	35.0
0	UNILEVER PLC (NEW) ADS	5-17-99	.00	.00	5-17-99	.00	13.13	13.1
0	CITIGROUP INC	6-18-99	.00	.00	6-18-99	.00	21.59	21.5
0	SBC COMMUNICATIONS	10-13-99	.00	.00	10-13-99	.00	11.06	11.0
0	TOTAL FINA SA ADS	11-02-99	.00	.00	11-02-99	.00	45.65	45.6
0	CELANESE AG	11-08-99	.00	.00	11-08-99	.00	8.96	8.9
0	EXXON MOBIL CORP	12-02-99	.00	.00	12-02-99	.00	33.40	33.4
0	AVENTIS ADS	12-21-99	.00	.00	12-21-99	.00	45.60	45.6
0	BRITISH AEROSPACE SPN ADR	12-29-99	.00	.00	12-29-99	.00	6.20	6.2
	TOTAL SHORT-TERM GAIN							635.6
	TOTAL SHORT-TERM LOSS							.0
	TOTAL SHORT-TERM			1,805.05			2,440.65	635.6
LONG-TERM GAIN/(LOSS) TRANSACTIONS								
30	AMERITECH CORP	10-09-96	27.96	838.83	3-03-99	60.62	1,818.68	979.8
20	CADBURY SCHW PLC ADR 10 ORD NW	6-19-95	30.38	607.50	3-03-99	61.19	1,223.70	616.2
20	CITIGROUP INC	1-03-95	11.04	220.80	3-03-99	58.00	1,159.96	939.1
50	ENDESA SA ADS	3-07-96	13.38	668.75	3-03-99	25.81	1,290.58	621.8
55	MANNESMANN AG SP ADR	9-09-93	19.50	1,072.50	3-03-99	125.50	6,902.27	5,829.7

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MORGAN STANLEY DEAN WITTER

ACCESS

* * CAPITAL GAINS SCHEDULE * *

642-113487 NICK JOE RAHALL II

1-01-99 THRU 12-31-

LAZARD FRERES ASSET MGMT

MR PEAR/MR HANDO 0:

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Los
LONG-TERM GAIN/(LOSS) TRANSACTIONS								
170	MARCONI PLC SP ADR	1-31-96	5.59	949.62	3-03-99	9.12	1,551.19	601.!
5	VIVENDI SPONSORED ADR	9-20-96	20.74	103.72	3-03-99	50.00	249.99	146.:
70	VIVENDI SPONSORED ADR	9-15-95	20.62	1,443.61	3-03-99	50.00	3,499.88	2,056.:
10	CITIGROUP INC	1-03-95	11.04	110.40	4-08-99	72.25	722.47	612.!
10	HEINEKEN NV ADR	11-15-94	19.25	192.46	4-13-99	48.25	482.48	290.!
10	INTL BUSINESS MACHINES CORP	5-17-96	54.88	548.75	4-21-99	168.31	1,683.07	1,134.:
285	ALLIED DOMECQ PLC ADR SPON	1-25-96	8.23	2,345.55	8-12-99	8.93	2,545.19	199.:
30	SEARS ROEBUCK & CO	1-03-95	25.22	756.71	11-03-99	28.22	846.54	89.!
6	PHILIP MORRIS CO INC	4-07-94	16.29	97.75	11-05-99	26.41	158.45	60.:
66	PHILIP MORRIS CO INC	1-26-94	19.42	1,281.50	11-05-99	26.41	1,742.98	461.:
40	LOCKHEED MARTIN CORP	3-30-95	26.10	1,043.92	11-08-99	17.73	709.21	(334.:
7	SONY CORP ADR 1974 NEW	3-12-96	59.00	413.00	11-18-99	175.75	1,230.26	817.:
8	SONY CORP ADR 1974 NEW	10-27-93	44.88	359.00	11-18-99	175.75	1,406.01	1,047.!
4	CELANESE AG	5-03-94	8.50	34.01	12-09-99	16.09	64.34	30.:
45	HOECHST 2B EXCHNGD AVENTIS	5-03-94	21.09	949.24	12-20-99	47.30	2,128.50	1,179.:
	TOTAL ALL LONG-TERM GAIN							17,712.!
	TOTAL ALL LONG-TERM LOSS							(334.
	TOTAL ALL LONG-TERM			14,037.62			31,415.75	17,378.:
	TOTAL ACCOUNT GAIN/(LOSS)			15,842.67			33,856.40	18,013.'

This Capital Gains Schedule is not an official tax document. It is provided for informational purposes only.

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MORGAN STANLEY DEAN WITTER ACTIVE ASSETS® PORTFOLIO ADVANTAGE ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

Your Financial Advisor
MR PEAR/MR HANDO
MORGAN STANLEY DEAN WITTER
1775 EYE STREET, NW SUITE 200
WASHINGTON, DC 20006
(202) 862-9000

Account Number FA
642 122048 022

AAA Customer Service
1-800-869-3326

THE HONORABLE NICK JOE RAHALL II 092357
AGENT MSDW ADVISORS
PRIVATE & CONFIDENTIAL 642
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

Asset Summary

	Value	% of Assets
Money Market Funds	$2,185.40	2.1%
Stocks	98,014.66	97.9
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	$100,200.06	100.0%
Cash	0.00	
Total Asset Value	$100,200.06	

Income Summary

	Year To Date
Money Market Funds	$253.35
Stocks	1,464.72
Municipal Bonds	0.00
Corporate Fixed Income	0.00
Government Securities	0.00
Mutual Funds	0.00
Unit Investment Trusts	0.00
Certificates of Deposit	0.00
Other	0.00
Total Income	$1,718.07
Taxable Income	$1,718.07
Tax Exempt Income	$0.00

Activity Summary

Total Asset Value January 01, 1999		$85,528.59
Cash/Money Market Activity for 1999		
Credits To Your Account		
Dividend and Interest	1,718.07	
Deposits	27,000.00	
Sales Proceeds/Redemptions	117,058.43	
Other Credits	414.94	
Total Credits	146,191.44	
Debits To Your Account		
Checking	0.00	
Debit Card	0.00	
Withdrawals	0.00	
Funds to Purchase Securities	-142,396.78	
Other Debits	-3,191.46	
Total Debits	-145,588.24	
Changes in Asset Value for 1999		
Value of Priced Assets 1/01/99	81,944.66	
Securities Bought	142,396.78	
Securities Received	0.00	
Securities Sold/Redeemed	-117,058.43	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	-9,268.35	
Value of Priced Assets 12/31/99	98,014.66	
Net Change in Asset Value		14,670.99
Total Asset Value as of December 31, 1999		$100,200.06

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MORGAN STANLEY DEAN WITTER ACTIVE ASSETS® PORTFOLIO ADVANTAGE ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number FA
642 122048 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
ACTIVE ASSETS MONEY TRUST	2,185.40	2.1%	117
Total Cash and Money Market Funds	$2,185.40	2.1%	$117

Net Change Since January 1, 1999 $483.26

Annualized 30 Day Yields

Active Assets Money Trust....5.39%
Active Assets Govt. Sec. Tr....5.03%
Active Assets California Tax Free....2.74%
Active Assets Tax Free Trust....3.22%
Active Assets Insured Account....4.80%
Active Assets Deposit Account....4.80%

Stocks		Current Price		Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks									
35	ANHEUSER BUSCH COS INC	70	7/8	2,480.62	2.5%	42	1.69%	BUD	Next Dividend Payable 03/00
72	AT&T CORPORATION	50	13/16	3,658.50	3.7%	63	1.73%	T	Next Dividend Payable 02/01/00
30	ATLANTIC RICHFIELD CO DE	86	1/2	2,595.00	2.6%	85	3.29%	ARC	Next Dividend Payable 03/00
55	AVON PRODUCTS INC	33		1,815.00	1.8%	39	2.18%	AVP	Next Dividend Payable 03/00
175	BAKER HUGHES INC	21	1/16	3,685.93	3.7%	80	2.18%	BHI	Next Dividend Payable 02/00
40	BANK OF AMERICA CORP	50	3/16	2,007.50	2.0%	80	3.98%	BAC	Next Dividend Payable 03/00
45	BRISTOL MYERS SQUIBB CO	64	3/16	2,868.43	2.9%	44	1.52%	BMY	Next Dividend Payable 02/00
55	BURLINGTON RESOURCES INC	33	1/16	1,818.43	1.8%	30	1.46%	BR	Next Dividend Payable 01/03/00
52	CITIGROUP INC	55	11/16	2,895.75	2.9%	29	1.00%	C	Next Dividend Payable 02/00
95	COMPAQ COMPUTER CORP	27	1/16	2,570.93	2.6%	9	.36%	CPQ	Next Dividend Payable 01/20/00
147	CONOCO INC CL B	24	7/8	3,656.62	3.6%	111	3.05%	COCB	Next Dividend Payable 03/00
40	ELI LILLY & CO	66	1/2	2,660.00	2.7%	41	1.56%	LLY	Next Dividend Payable 03/00
85	ENRON CORP	44	3/8	3,771.87	3.8%	42	1.12%	ENE	Next Dividend Payable 03/00
26	EXXON MOBIL CORP	80	9/16	2,094.62	2.1%	45	2.18%	XOM	
48	FANNIE MAE	62	7/16	2,997.50	2.5%	43	1.72%	FNM	Next Dividend Payable 02/00
25	GENERAL ELECTRIC CO	154	3/4	3,868.75	3.9%	41	1.05%	GE	Next Dividend Payable 01/25/00
45	GTE CORP	70	9/16	3,175.31	3.2%	84	2.66%	GTE	Next Dividend Payable 01/01/00
100	HERCULES INC	27	7/8	2,787.50	2.8%	108	3.87%	HPC	Next Dividend Payable 03/00
30	HEWLETT PACKARD	113	3/4	3,412.50	3.4%	19	.56%	HWP	Next Dividend Payable 01/12/00
54	HONEYWELL INTERNATIONAL INC	57	11/16	3,230.58	3.2%	38	1.17%	HON	
25	INTEL CORP	82	5/16	2,057.81	2.1%	3	.14%	INTC	Next Dividend Payable 03/00
35	INTERNATIONAL PAPER CO	56	7/16	1,975.31	2.0%	35	1.77%	IP	Next Dividend Payable 03/00
30	INTL BUSINESS MACHINES CORP	107	7/8	3,236.25	3.2%	16	.46%	IBM	Next Dividend Payable 03/00
45	KIMBERLY CLARK CORP	65	7/16	2,944.68	2.9%	46	1.58%	KMB	Next Dividend Payable 01/04/00
95	PEPSICO INC NC	35	1/4	3,348.75	3.3%	51	1.53%	PEP	Next Dividend Payable 01/03/00
65	PITNEY BOWES INC	48	5/16	3,140.31	3.1%	66	2.11%	PBI	Next Dividend Payable 03/00
30	PROVIDIAN FINCL CORP	91	1/16	2,731.87	2.7%	6	.21%	PVN	Next Dividend Payable 03/00
10	RAYTHEON CO (NEW) CLB	26	9/16	265.62	0.3%	8	3.01%	RTNB	Next Dividend Payable 01/31/00
55	SBC COMMUNICATIONS	48	3/4	2,681.25	2.7%	53	2.00%	SBC	Next Dividend Payable 02/00
60	SCHERING PLOUGH CORP	42	3/8	2,542.50	2.5%	30	1.17%	SGP	Next Dividend Payable 02/00

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MORGAN STANLEY DEAN WITTER ACTIVE ASSETS® PORTFOLIO ADVANTAGE ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number FA
642 122048 022

Stocks		Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks								
70	SEAGRAM CO LTD	44 3/4	3,132.50	3.1%	46	1.47%	VO	Next Dividend Payable 03/00
10	SPRINT CORP (FON GROUP)	67 5/16	673.12	0.7%	5	.74%	FON	Next Dividend Payable 03/00
75	TYCO INTERNATIONAL LTD NEW	39	2,925.00	2.9%	3	.12%	TYC	Next Dividend Payable 02/01/00
40	UNITED TECHNOLOGIES CORP	65	2,600.00	2.6%	32	1.23%	UTX	Next Dividend Payable 03/00
50	MEYERHAEUSER CO	71 13/16	3,590.62	3.6%	80	2.22%	MY	Next Dividend Payable 02/00
85	WILLIAMS CO INC	30 9/16	2,597.81	2.5%	51	1.96%	WMB	Next Dividend Payable 03/00
Total Stocks			$98,014.66	97.9%	$1,611	1.64%		
Net Change Since January 1, 1999			$16,870.00					

Asset Summary	Value	Est Yrly Income
Total Asset Value	$100,200.86	$1,729
Total Net Change In Priced Assets Since January 1, 1999	$16,870.00	

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Activity	Description	Amount	Income Category
Dividend	ACTIVE ASSETS MONEY TRUST	253.35	Money Market Funds
Dividend	ALBERTSONS INC	27.00	Stocks
Dividend	AMERICAN HOME PRODUCTS	41.98	Stocks
Dividend	ANHEUSER BUSCH COS INC	30.80	Stocks
Dividend	AT&T CORPORATION	38.83	Stocks
Dividend	ATLANTIC RICHFIELD CO DE	64.14	Stocks
Dividend	BAKER HUGHES INC	48.30	Stocks
Dividend	BANK OF AMERICA CORP	56.00	Stocks
Dividend	BANK ONE CORP	21.00	Stocks
Dividend	BRISTOL MYERS SQUIBB CO	29.04	Stocks
Dividend	CASH AMER INTERNATIONAL INC	5.00	Stocks
Dividend	CITIGROUP INC	28.21	Stocks
Dividend	CLAIRES STORES	12.00	Stocks
Dividend	COMMERCIAL FEDERAL CORP	4.88	Stocks
Dividend	CONOCO INC CL B	55.86	Stocks
Dividend	DANA CORP	17.05	Stocks

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MORGAN STANLEY DEAN WITTER

1099-DIV

STATEMENT FOR TAX YEAR 1999

OMB. NO.
1545-0110

Account Number FA
642 122048 022

Social Security Number
236-78-8645

FA Phone Number
(202) 862-9000

THE HONORABLE NICK JOE RAHALL II
AGENT MSDW ADVISORS 001940
PRIVATE & CONFIDENTIAL
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

DIVIDENDS AND DISTRIBUTIONS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

The following dividend information is reported to the IRS by payer. When preparing your income tax return you should list payer information separately as shown below.

Payer	1. Ordinary Dividends	2a. Total Capital Gain Distributions	2b. 28% Gain Distributions	2c. Section 1250 Gain Distributions	3. Non-Taxable Distributions	4. Federal Income Tax Withheld	6. Foreign Tax Paid
DEAN WITTER REYNOLDS INC. PAYER'S FED. ID. # 94-1671384	1,464.72	0.00	0.00	0.00	0.00	0.00	1.73
ACTIVE ASSETS MONEY TRUST PAYER'S FED. ID. # 13-3075005 PLAN NUMBER 260-080140780	253.35	0.00	0.00	0.00	0.00	0.00	0.00

IMPORTANT TAX INFORMATION - PLEASE RETAIN FOR YOUR RECORDS

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number 642 122048 FA 022

DETAIL OF DIVIDENDS AND DISTRIBUTIONS

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
ALBERTSONS INC							
06/30/99	9.00						
07/30/99	9.00						
11/10/99	9.00						
AMERICAN HOME PRODUCTS							
06/01/99	10.13						
09/01/99	15.75						
12/01/99	16.10						
ANHEUSER BUSCH COS INC							
06/09/99	9.80						
09/09/99	10.50						
12/09/99	10.50						
AT&T CORPORATION							
05/01/99	11.55						
08/02/99	11.44						
11/01/99	15.84						
ATLANTIC RICHFIELD CO DE							
06/15/99	21.38						
09/15/99	21.38						
12/15/99	21.38						
BAKER HUGHES INC							
05/28/99	17.25						
08/27/99	17.25						
11/26/99	13.80						
BANK OF AMERICA CORP							
06/25/99	18.00						
09/24/99	18.00						
12/23/99	20.00						
BANK ONE CORP							
04/01/99	21.00						
BRISTOL MYERS SQUIBB CO							
05/01/99	9.68						
08/01/99	9.68						
11/01/99	9.68						
CASH AMER INTERNATIONAL INC							
02/16/99	5.80						
CITIGROUP INC							
05/28/99	9.45						

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number 642 122048 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
CITIGROUP INC							
08/27/99	9.38						
11/24/99	9.38						
CLAIRES STORES							
02/17/99	12.00						
COMMERCIAL FEDERAL CORP							
01/14/99	4.88						
COMDCO INC CL B							
09/11/99	27.93						
12/10/99	27.93						
DANA CORP							
09/15/99	17.05						
DU PONT EI DE NEMOURS & CO							
06/12/99	17.50						
ELI LILLY & CO							
09/10/99	9.20						
12/10/99	9.20						
ENRON CORP							
06/21/99	12.50						
09/20/99	12.50						
12/20/99	10.63						
FANNIE MAE							
05/25/99	10.80						
08/25/99	10.80						
11/25/99	10.80						
GENERAL ELECTRIC CO							
07/26/99	8.75						
10/25/99	8.75						
GOODRICH B F CO							
07/01/99	22.00						
10/01/99	22.00						
GTE CORP							
07/01/99	21.13						
10/01/99	21.13						
HERCULES INC							
06/25/99	27.00						
09/24/99	27.00						
12/29/99	27.00						
HEWLETT PACKARD							
06/14/99	6.40						

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number 642 122048 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
HEWLETT PACKARD							
07/14/99	6.40						
10/13/99	4.80						
HONEYWELL INC							
06/14/99	11.60						
09/13/99	8.70						
11/29/99	8.70						
HOUSEHOLD INTL INC							
04/15/99	11.05						
07/15/99	11.05						
HUGHES SUPPLY INC							
02/19/99	25.50						
INTL BUSINESS MACHINES CORP							
06/10/99	3.60						
09/10/99	3.60						
12/10/99	3.60						
KIMBERLY CLARK CORP							
07/02/99	15.60						
10/04/99	15.60						
LEGG MASON INC							
01/11/99	10.79						
LNR PROPERTY CORP							
02/15/99	1.25						
MERISTAR HOSPITALITY							
01/29/99	101.00						
MOBIL CORP DELAWARE							
06/10/99	11.40						
09/10/99	11.40						
12/10/99	11.40						
PEPSICO INC NC							
06/30/99	10.13						
09/30/99	12.83						
PG&E CORPORATION							
04/15/99	27.00						
07/15/99	27.00						
PITNEY BOWES INC							
06/12/99	12.75						
09/12/99	12.75						
12/12/99	16.58						

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

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MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
AGENT MSDW ADVISORS

Account Number 642 122048 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
PROVIDIAN FINCL CORP							
06/15/99	0.75						
09/15/99	2.25						
12/15/99	1.50						
RITE AID CORP							
06/26/99	16.68						
07/26/99	16.68						
10/25/99	20.13						
SBC COMMUNICATIONS							
05/03/99	13.41						
08/02/99	13.41						
11/01/99	13.41						
SCHERING PLOUGH CORP							
05/28/99	6.25						
08/31/99	6.25						
11/30/99	8.75						
SEAGRAM CO LTD							
12/15/99	11.55						1.73
SPRINT CORP (FON GROUP)							
12/29/99	1.25						
UNITED TECHNOLOGIES CORP							
06/10/99	7.20						
09/10/99	8.00						
12/10/99	8.00						
USX MARATHON GP							
06/10/99	17.85						
09/10/99	17.85						
WARNER LAMBERT CO							
06/10/99	8.00						
09/10/99	8.00						
12/10/99	8.00						
WEYERHAEUSER CO							
11/29/99	20.00						
WILLIAMS CO INC							
06/28/99	12.75						
09/13/99	12.75						
12/27/99	12.75						
XEROX CORP							
07/01/99	10.00						

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC

MORGAN STANLEY DEAN WITTER

1099-DIV DETAIL

STATEMENT FOR TAX YEAR 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number 642 122048 FA 022

Payer/Pay Date	Ordinary Dividends	Long Term Capital Gain Distributions	28% Gain Distributions	Section 1250 Gain Distributions	Non-Taxable Distributions	Federal Income Tax Withheld	Foreign Tax Paid
DEAN WITTER REYNOLDS INC.							
XEROX CORP							
10/01/99	10.00						
Total	1,464.72	0.00	0.00	0.00	0.00	0.00	1.73
ACTIVE ASSETS MONEY TRUST							
1999	253.35						
Total	253.35	0.00	0.00	0.00	0.00	0.00	0.00

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

Capital Gains Schedule

Account Number: 642-122048-022

Reporting Period: 1/01/99 thru 3/09/99

SHORT-TERM TRANSACTIONS

		Purchase Information		Sale Information		
Quanity	Description	Date	Cost	Date	Proceeds	Gain or (loss)
150	ABR Information SVCS	11/23/1998	2,306.25	03/02/1999	2,765.53	459.28
75	Action Perform Cos Inc	11/30/1998	2,531.25	03/02/1999	2,657.72	126.47
75	Bell & Howell Company	12/01/1998	2,507.81	03/02/1999	2,493.66	(14.15)
75	Boron Lepore & Associates	11/12/1998	1,968.75	02/19/1999	834.35	(1,134.40)
100	Cerner Corp	03/16/1998	2,354.43	03/02/1999	1,537.44	(816.99)
75	Commerical Federal Corp	08/03/1998	2,090.63	03/02/1999	1,668.69	(421.94)
150	Del Monte Foods Company	02/26/1999	2,128.13	03/02/1999	2,165.55	37.42
125	Fore Systems Inc	02/12/1999	1,992.19	03/02/1999	1,843.68	(148.51)
100	Gartner Group	11/17/1998	1,850.00	03/02/1999	2,149.92	299.92
100	LNR Property Corp	12/03/1998	1,943.75	03/02/1999	1,824.93	(118.82)
150	Mail Well Inc	12/03/1998	1,940.63	03/02/1999	2,099.93	159.30
200	Menstar Hospitality	06/03/1998	656.00	03/02/1999	3,587.38	2,931.38
100	Micro Warehouse Inc	11/16/1998	2,237.50	02/05/1999	3,393.63	1,156.13
107	Nova Corp Georgia	04/07/1998	2,821.88	03/02/1999	2,681.60	(140.28)
100	Performance Food Group Company	11/09/1998	2,500.00	03/02/1999	2,649.91	149.91
500	Pharmerica Inc	12/08/1998	1,968.75	03/02/1999	3,093.64	1,124.89
225	PSC Inc	11/10/1998	2,221.88	03/02/1999	1,940.56	(281.32)
100	Sykes Enterprises Inc	12/03/1998	1,993.75	01/19/1999	2,806.15	812.40
100	World Color Press Inc.	02/08/1999	2,412.50	03/02/1999	2,449.91	37.41
		TOTAL SHORT-TERM	40,426.08		44,644.18	4,218.10

LONG-TERM TRANSACTIONS

200	Artesyn Tech Inc	02/13/1996	2,300.00	03/02/1999	2,912.40	612.40
400	Cash American International	11/19/1996	2,850.00	03/02/1999	5,399.82	2,549.82
300	Claires Stores	01/13/1997	3,900.00	03/02/1999	6,899.77	2,999.77
500	Genesco Inc	11/13/1995	1,812.50	03/02/1999	3,656.12	1,843.62
300	Hughes Supply Inc	06/18/1997	8,025.00	03/02/1999	5,943.55	(2,081.45)
200	Interim Svcs Inc	10/18/1995	2,725.00	03/02/1999	3,812.37	1,087.37
168	Legg Mason Inc	05/16/1996	1,668.75	03/02/1999	4,782.72	3,113.97
100	Protein Design Labs	06/13/1996	2,737.50	03/02/1999	1,624.94	(1,112.56)
		TOTAL LONG-TERM	26,018.75		35,031.69	9,012.94
		TOTAL GAIN/LOSS	66,444.83		79,675.87	13,231.04

MORGAN STANLEY DEAN WITTER ADVISORS

Capital Gains Schedule
for
THE HONORABLE NICK JOE RAHALL

Account Number: 642-122048-022

Reporting Period: 03/09/99 thru 12/31/99

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
50	EMERSON ELECTRIC CO	3-10-99	58.56	2,928.13	4-23-99	60.02	3,000.76	72.63
0	AT&T CORPORATION	4-26-99	.00	.00	4-26-99	.00	27.90	27.90
50	BANK ONE CORP	3-10-99	56.44	2,821.88	5-28-99	56.25	2,812.40	(9.48)
0	CITIGROUP INC	6-18-99	.00	.00	6-18-99	.00	21.59	21.59
10	HONEYWELL INC	3-10-99	73.63	736.25	6-22-99	122.81	1,228.10	491.85
65	HOUSEHOLD INTL INC	3-10-99	45.44	2,953.44	7-16-99	47.77	3,104.92	151.48
0	CONOCO INC CL B	8-23-99	.00	.00	8-23-99	.00	13.34	13.34
90	PG&E CORPORATION	3-10-99	31.94	2,874.38	8-23-99	31.00	2,789.90	(84.48)
85	USX MARATHON GP	3-10-99	22.88	1,944.38	9-02-99	30.81	2,618.97	674.59
10	HEWLETT PACKARD	3-10-99	68.44	684.38	9-07-99	109.89	1,098.88	414.50
55	DANA CORP	8-23-99	43.59	2,397.64	9-20-99	36.97	2,033.21	(364.43)
30	BAKER HUGHES INC	3-19-99	23.25	697.50	9-30-99	27.79	833.63	136.13
15	ENRON CORP	4-13-99	32.54	488.10	10-04-99	39.79	596.89	108.79
50	XEROX CORP	3-10-99	55.13	2,756.25	10-19-99	24.12	1,206.20	(1,550.05)
50	ALBERTSONS INC	3-10-99	55.94	2,796.88	10-26-99	39.89	1,994.70	(802.18)
15	PROVIDIAN FINCL CORP	5-26-99	84.55	1,268.23	10-28-99	107.00	1,604.94	336.71
20	GOODRICH B F CO	9-20-99	32.08	641.65	11-02-99	22.47	449.36	(192.29)
80	GOODRICH B F CO	3-10-99	35.31	2,825.00	11-02-99	22.47	1,797.42	(1,027.58)
5	CHUBB CP	10-22-99	50.54	252.72	11-09-99	58.25	291.24	38.52
30	RITE AID CORP	8-05-99	19.81	594.38	11-10-99	5.42	162.71	(431.67)
15	RITE AID CORP	3-15-99	24.13	361.88	11-10-99	5.42	81.35	(280.53)
60	RITE AID CORP	3-12-99	24.00	1,440.00	11-10-99	5.42	325.42	(1,114.58)
70	RITE AID CORP	3-10-99	38.13	2,668.75	11-10-99	5.42	379.66	(2,289.09)
15	CITIGROUP INC	3-10-99	42.61	639.11	11-17-99	56.46	846.93	207.82
15	KIMBERLY CLARK CORP	3-10-99	49.13	736.88	11-29-99	65.01	975.18	238.30

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Information contained herein is based on data obtained from sources believed to be reliable; however, we cannot make any representations as to its accuracy or completeness. Any analytical statements contained only express opinions that are subject to change without notice.

MORGAN STANLEY DEAN WITTER ADVISORS

Capital Gains Schedule
for
THE HONORABLE NICK JOE RAHALL

Account Number: 642-122048-022 Reporting Period: 03/09/99 thru 12/31/99

Quantity	Security Description	PURCHASE INFORMATION Date	Per Unit	Total Cost	SALE INFORMATION Date	Per Unit	Proceeds	Realized Gain or (Loss)
SHORT-TERM GAIN/(LOSS) TRANSACTIONS								
0	EXXON MOBIL CORP	12-02-99	.00	.00	12-02-99	.00	33.40	33.40
0	HONEYWELL INTERNATIONAL INC	12-03-99	.00	.00	12-03-99	.00	15.72	15.72
40	WARNER LAMBERT CO	3-10-99	70.81	2,832.50	12-07-99	85.31	3,412.38	579.88
45	AMERICAN HOME PRODUCTS	3-10-99	61.88	2,784.38	12-16-99	46.21	2,079.62	(704.76)
15	AMERICAN HOME PRODUCTS	7-21-99	52.13	781.88	12-16-99	46.21	693.21	(88.67)
10	AMERICAN HOME PRODUCTS	5-26-99	57.06	570.63	12-16-99	46.21	462.14	(108.49)
10	SCHERING PLOUGH CORP	3-10-99	56.13	561.25	12-16-99	44.00	439.98	(121.27)
	TOTAL SHORT-TERM GAIN							3,563.15
	TOTAL SHORT-TERM LOSS							(9,169.55)
	TOTAL SHORT-TERM			43,038.45			37,432.05	(5,606.40)
	TOTAL ACCOUNT GAIN/(LOSS)			43,038.45			37,432.05	(5,606.40)

This Capital Gains Schedule is not an official tax document. It is provided for informational purposes only.

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Information contained herein is based on data obtained from sources believed to be reliable; however, we cannot make any representation as to its accuracy or completeness. Any prospectus statements constitute only current opinions that are subject to change without notice.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number FA
042 115817 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.98	---	---
MSDW LIQUID ASSET FUND	19.91		1
Total Cash and Money Market Funds	19.91		1
Net Change Since Last Statement	0.01		

Annualized 30 Day Yields	
MSDW Liquid Asset Fund	5.29%
MSDW US Govt Mymkt	4.84%

Stocks	Current Price	Value	Pct of Assets	Est Yrly Income	Dividend Yield	Symbol	Additional Information
Common Stocks							
100 APM FINCL GP INC CLASS A	N/A	0.00	N/A	0	0.00%	ARMGA	
Total Stocks		0.00	N/A	0	0.00%		
Net Change Since Last Statement		0.00					

Mutual Funds	Current Price	Value	Pct of Assets	Est Yrly Income	Distribution Rate	Fund Plan Number	Symbol	Dividend/ Cap Gains Option
Morgan Stanley Dean Witter Mutual Funds								
475.224 MSDW AMERICAN OPPORTUNITIES B	42.4300	20,784.79	58.2%	N/A	N/A	044911846	AMOBX	Reinv/Reinv
358.496 MSDW DIVIDEND GROWTH B	57.7400	20,711.10	41.8%	N/A	N/A	049791214	DIVBX	Reinv/Reinv
Total Mutual Funds		41,495.89	100.0%	N/A	N/A			
Net Change Since Last Statement		3,416.32						

Asset Summary	Value	Est Yrly Income
Total Assets Cash	19.91	1
Total Assets Other Than Cash	41,495.89	

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MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 1999

Your Financial Advisor
MR PEAR/MR HANDO
MORGAN STANLEY DEAN WITTER
1775 EYE STREET, NW SUITE 200
WASHINGTON, DC 20006
(202) 862-9000

Account Number 642 115817 FA 022

Date of Birth May 20, 1949

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

IRA Standard
Dated 03/22/94

Asset Summary

	Value	% of Asset
Money Market Funds	019.91	0.02
Stocks	0.00	0.0
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	49,495.09	100.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	0.00	0.0
Asset Value	049,515.00	100.02
Cash	0.00	
Total Asset Value	049,515.00	

[illegible]

	This Month	Year To Date
Money Market Funds	00.01	0271.03
Stocks	0.00	446.50
Municipal Bonds	0.00	0.00
Corporate Fixed Income	0.00	09.25
Government Securities	0.00	0.00
Mutual Funds	74.37	129.91
Unit Investment Trusts	0.00	0.00
Certificates of Deposit	0.00	0.00
Other	0.00	0.00
Total Income	074.38	0907.49

Activity Summary

Total Asset Value October 31 1999		043,331.42
Cash/Money Market Activity		
Closing Balance 10/31	019.90	
Credits To Your Account		
Dividends and Interest	74.38	
Deposits	0.00	
Sales Proceeds/Redemptions	0.00	
Other Credits	2,780.82	
Total Credits	2,855.20	
Debits To Your Account		
Withdrawals	0.00	
Funds to Purchase Securities	-2,855.19	
Other Debits	0.00	
Total Debits	-2,855.19	
Closing Balance 12/31	19.91	
Net Change Cash/Money Market Activity		0.01
Changes in Asset Value		
Value of Priced Assets 10/31	043,311.52	
Securities Bought	2,855.19	
Securities Received	0.00	
Securities Sold/Redeemed	0.00	
Securities Delivered	0.00	
Transactions at Fund Company	0.00	
Change in Value of Priced Assets	3,329.18	
Value of Priced Assets 12/31	49,495.09	
Net Change in Asset Value		6,184.37
[illegible]		[illegible]

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

Attachment 10 - p.1

Your Account Statement

BARINGTON CAPITAL
888 SEVENTH AVENUE
NEW YORK NY 10019

INVESTMENT REP #665
888 SEVENTH AVENUE
NEW YORK NY 10019
(800) 695-2584

NICK JOE RAHALL
1301 DELAWARE AVE SW APT 409N
WASHINGTON DC 20024-3913

Portfolio Overview

Assets

	Value as of December 31, 1999	% of total assets
Cash	0.00	0.0%
Money funds	3.96	100.0
Common stocks	0.00	0.0
Preferred stocks	0.00	0.0
Mutual funds	0.00	0.0
Government debt issues	0.00	0.0
Corporate debt issues	0.00	0.0
Municipal debt issues	0.00	0.0
Certificates of deposit	0.00	0.0
Options	0.00	0.0
Limited partnerships	0.00	0.0
Other	0.00	0.0
Total assets	$3.96	100.0%

Liabilities

	Value as of December 31, 1999	% of total assets
Cash debit	$0.00	0.0%
Margin debit	0.00	0.0
Short options	0.00	0.0
Other short securities	0.00	0.0
Total liabilities	$0.00	0.0%

Net Value of Your Account	$3.96
Net Value as of December 31, 1998	$9,378.97

Account carried by DB Alex. Brown LLC

Activity

	This period
Net value of your account as of September 30	$3.96
Net cash activity	0.00
Net securities into/out of account	0.00
Net return on your portfolio	0.00
Net value of your account as of December 31	$3.96

Income

	This period	Year to date
Net income received	$0.00	$15.00
Current estimated annual income	$0.19	
Current estimated annual yield	4.77%	

BARINGTON
BARINGTON CAPITAL GROUP

Statement of Account
October 1 to December 31, 1999
Account 814-54462

BARINGTON
BARINGTON CAPITAL GROUP

Statement of Account
October 1 to December 31, 1999
Account 814-54462

Cash Summary

Opening Cash Balance $0.00

Income Summary

	This period	Year to date
Taxable dividends	$0.00	$15.00
Taxable interest	0.00	0.00
Capital gains distributions received	0.00	0.00
Non-taxable dividends	0.00	0.00
Non-taxable interest	0.00	0.00
Net income received	$0.00	$15.00

Cash Activity

	This period	Year to date
Deposits	$0.00	$0.00
Withdrawals	0.00	9,389.99 -
U.S. tax withheld	0.00	0.00
Non-resident tax withheld	0.00	0.00
Foreign taxes withheld	0.00	0.00
Interest charges on cash debit	0.00	0.00
Interest charges on margin debit	0.00	0.00
Net cash activity	$0.00	$9,389.99 -

Purchases and Sales

	This period	Year to date
Total purchases	$0.00	$15.00 -
Total sales	0.00	6,637.18
Other money fund sales	0.00	0.00
Net purchases/sales(excl. money funds)	$0.00	$6,622.18

Other Activity

	This period	Year to date
Bond redemptions	$0.00	$0.00
Other activity	0.00	0.00
Net other activity	$0.00	$0.00

Closing Cash Balance $0.00

Portfolio Summary

Activity

	This period	Year to date
Previous net account value	$3.98	$9,378.97
Net cash activity	0.00	9,389.99 -
Net securities into/out of account	0.00	0.00
Adjusted previous account value	$3.98	$11.82 -
Net change in market value	0.00	0.00
Net income received	0.00	15.00
Net account value as of December 31, 1999	$3.98	$3.98
Net return on portfolio	0.00	15.00

Attachment 11 - p.1

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS ACCOUNT®

FOR YEAR ENDING DECEMBER 31, 1999

Your Financial Advisor
MR PEAR/MR HANDO
MORGAN STANLEY DEAN WITTF
1775 EYE STREET, NW SUITE 2(
WASHINGTON, DC 20006
(202) 862-8000

Account Number FA
642 115818 022

AAA Customer Service
1-800-869-3326

THE HONORABLE NICK JOE RAHALL II 000344
PRIVATE & CONFIDENTIAL
2307 RAYBURN HOB 642
WASHINGTON DC 20515 0001

Asset Summary

	Value	% of Assets
Money Market Funds	$11,173.98	9.6%
Stocks	0.00	0.0
Municipal Bonds	0.00	0.0
Corporate Fixed Income	0.00	0.0
Government Securities	0.00	0.0
Mutual Funds	0.00	0.0
Unit Investment Trusts	0.00	0.0
Certificates of Deposit	0.00	0.0
Annuities/Insurance	0.00	0.0
Other	105,054.00	90.4
Asset Value	$116,227.14	100.0%
Cash	0.00	
Total Asset Value	$116,227.14	

Income Summary

	Year To Date
Money Market Funds	$42.60
Stocks	0.00
Municipal Bonds	0.00
Corporate Fixed Income	0.00
Government Securities	0.00
Mutual Funds	0.00
Unit Investment Trusts	0.00
Certificates of Deposit	0.00
Other	0.00
Total Income	$42.60
Taxable Income	$0.00
Tax Exempt Income	$42.60

Activity Summary

Total Asset Value January 01, 1999 $113,954.07

Cash/Money Market Activity for 1999

Credits To Your Account	
Dividend and Interest	42.60
Deposits	5,000.00
Sales Proceeds/Redemptions	16,241.53
Other Credits	0.00
Total Credits	21,284.13
Debits To Your Account	
Checking	-97.42
Debit Card	0.00
Withdrawals	0.00
Funds to Purchase Securities	-11,080.00
Other Debits	-0.00
Total Debits	-11,177.42

Changes in Asset Value for 1999

Value of Priced Assets 1/01/99	$112,903.70
Securities Bought	11,080.00
Securities Received	0.00
Securities Sold/Redeemed	-16,241.53
Securities Delivered	0.00
Transactions at Fund Company	0.00
Change in Value of Priced Assets	-7,660.07
Value of Priced Assets 12/31/99	105,054.00
Net Change in Asset Value	-7,049.62

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
PRIVATE & CONFIDENTIAL

Account Number 842 115016 FA 022

ASSET DETAILS

Cash and Money Market Funds	Amount	Pct of Assets	Est Yrly Income
CASH	.00	---	---
ACTIVE ASSETS TAX FREE TRUST	11,173.08	9.6%	359
Total Cash and Money Market Funds	011,173.08	9.6%	$359

Net Change Since January 1, 1999 016,126.71

Annualized 30 Day Yields

Active Assets Money Trust	3.39%
Active Assets Govt. Sec. Tr.	5.03%
Active Assets California Tax Free	2.76%
Active Assets Tax Free Trust	3.22%
Active Assets Insured Account	4.80%
Active Assets Deposit Account	4.80%

Other	Est. NAV	Valuation Est.	Pct of Assets	Fund Number	Date	Additional Information
Managed Futures						
43.609 PRT STRATEG FUND	(EST.VAL.) 2,409.00	105,054.08	90.4%	0	12/30	
Total Other		0105,054.08	90.4%			

Net Change Since January 1, 1999 -7,057.43

Asset Summary	Value	Est Yrly Income
Total Asset Value	0116,227.16	$359

Total Net Change in Priced Assets Since January 1, 1999 -7,041.43

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Activity	Description	Amount	Income Category
Dividend	ACTIVE ASSETS TAX FREE TRUST	62.40	Money Market Funds
	Total Dividends and Interest	$62.40	

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Attachment 12

MORGAN STANLEY DEAN WITTER

1099-INT 1099-OID
STATEMENT FOR TAX YEAR 1999

OMB NO.
1545-0112
1545-0117

PAYER:
DEAN WITTER REYNOLDS INC.
5 WORLD TRADE CENTER
NEW YORK, NY 10048
TAX ID NUMBER 94-1671384

THE HONORABLE NICK JOE RAHALL II
PRIVATE & CONFIDENTIAL
2307 RAYBURN HOB
WASHINGTON DC 20515 0001

Account Number 842 115916 FA 022

Social Security Number 236-78-8645

FA Phone Number (202) 862-9000

INTEREST INCOME, ORIGINAL ISSUE DISCOUNT AND INCOME NOT REPORTED TO IRS

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Interest Income (See 1099-INT Detail)

From Other Than U. S. Treasury Obligations	
Interest Credited and Allocated to Your Account	0.00
Accrued Interest Sold (See 1099-B, Gross Proceeds)	0.00
From U. S. Treasury Obligations	
U. S. Treasury Bill Interest	0.00
U. S. Treasury Coupon	0.00
Accrued Interest Sold (See 1099-B, Gross Proceeds)	0.00
Total Interest Income	0.00
Early Withdrawal Penalty	0.00
Federal Income Tax Withheld	0.00
Foreign Tax Paid	0.00

Original Issue Discount - OID (See 1099-OID Detail)

Original Issue Discount	0.00
Other Periodic Interest	0.00
Amount of Forfeiture	0.00
Federal Income Tax Withheld	0.00
Original Issue Discount on U.S. Treasury Obligations	0.00
Investment Expenses	0.00

Income Not Reported To IRS

Municipal Interest	0.00
Municipal Original Issue Discount	0.00
Tax Free Income	62.60
Municipal Accrued Interest (See Gross Proceeds Detail)	0.00

IMPORTANT TAX INFORMATION – PLEASE RETAIN FOR YOUR RECORDS

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

FIRST UNION Securities

Client Statement

Attachment 13 - p.1

Account Of:
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT

Capital Resource Account

Mail To:
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

Account Number
BK08 6540-0350

December 1, 1999 - December 31, 1999
Page 1 of 3

Investment Objective
TRADING, SPECULATION
OR HIGH INCOME

Your Financial Advisor
EDWARD G RAHALL

122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802

304-252-6221

Tax I.D. No.
233-17-4890

OUR CHIEF INVESTMENT STRATEGIST, RAO CHALASANI, HAS PUBLISHED HIS OUTLOOK FOR OPPORTUNITIES IN THE YEAR 2000. READ INVESTOR'S SPECTRUM--THEN TALK WITH YOUR FINANCIAL ADVISOR.

FIRST UNION SECURITIES, INC. (FUSI) IS A NON-BANK SUBSIDIARY OF FIRST UNION CORPORATION. INVESTMENTS OBTAINED THROUGH FUSI ARE NOT FDIC INSURED, UNLESS OTHERWISE STATED, ARE NOT DEPOSITS OR OTHER OBLIGATIONS OF FUSI OR ANY BANK, ARE NOT GUARANTEED BY FUSI OR ANY BANK, AND ARE SUBJECT TO INVESTMENT RISK, INCLUDING THE POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED.

Portfolio Summary

	ENDING BALANCE		BEGINNING BALANCE	
COMPOSITION	MARKET VALUE	PERCENT OF PORTFOLIO	MARKET VALUE	PERCENT OF PORTFOLIO
CASH AND MONEY MARKET	50,379.56	55.2	42,546.69	49.2
STOCKS	17,475.00	19.1	8,118.75	9.4
MUTUAL FUNDS	23,465.02	25.7	35,799.84	41.4
TOTAL ESTIMATED PORTFOLIO VALUE	91,319.58	100.0	86,465.28	100.0

Income Summary

DESCRIPTION	THIS PERIOD	YEAR TO DATE
MONEY MARKET FUND DIVIDENDS	281.69	2,423.67
CASH DIVIDENDS	270.25	358.25
TOTAL INCOME	551.94	2,781.92

---CONTINUED ON NEXT PAGE---

0000 000305 (Rev 01)

FIRST UNION Securities

Client Statement

Account Of:
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT

Account Number
8K08 6540-0350

December 1, 1999 - December 31, 1999

Current Portfolio

TYPE/DESCRIPTION	SYMBOL	QUANTITY	CURRENT PRICE	ESTIMATED VALUE	ESTIMATED ANNUAL INCOME	CURRENT YIELD
Cash and Money Market						
CASH		3,483.57		3,483.57	0	0.0
EVERGREEN CRT MONEY MARKET PORTFOLIO 4.86% AVERAGE YIELD 11/16/99-12/31/99		46,895.99	1.0000	46,895.99	2,279	4.8
TOTAL CASH AND MONEY MARKET				50,379.56	2,279	N/A
Stocks						
AT HOME CORP SER A	ATHM	200	42.8750	8,575.00	0	0.0
SIRIUS SATELLITE RADIO INC	CDRD	200	44.5000	8,900.00	0	0.0
TOTAL STOCKS				17,475.00	0	0.0
Mutual Funds						
LIBERTY FDS TR III COLONIAL SELECT VALUE	COGBX	545.8390	20.6000	11,244.28	0	0.0
VK PACE FUND CL B	ACPBX	895.9490	13.6400	12,220.74	0	0.0
TOTAL MUTUAL FUNDS				23,465.02	0	0.0

Estimated Annual Income and Current Yield refer to dividends and interest income only, and typically do not reflect total return.

TOTAL ESTIMATED PORTFOLIO VALUE	91,319.58	2,279	2.5

Activity Summary

BEGINNING CASH AND MONEY MARKET			42,546.69
	ADDITIONS	SUBTRACTIONS	NET AMOUNT
DIVIDENDS AND INTEREST	551.94	.00	551.94
SECURITY SALES	25,697.94	.00	25,697.94
SECURITY PURCHASES	.00	21,007.54	-21,007.54
OTHER ACTIVITY	2,590.53	.00	2,590.53
TOTALS	28,840.41	21,007.54	7,832.87
ENDING CASH AND MONEY MARKET			50,379.56

Account Activity

DATE	TRANSACTION	QUANTITY	DESCRIPTION	TRANSACTION PRICE	AMOUNT
Dividends and Interest					
12 15	SHRT TRM GAIN		LIBERTY FDS TR III COLONIAL SELECT VALUE FD CL B 121599 545.83900	-	5.38
12 17	SHRT TRM GAIN		VK PACE FUND CL B 121599 895.94900 AS OF 12/15/99	-	264.87

---CONTINUED ON NEXT PAGE---

Account carried by First Clearing Corporation member New York Stock Exchange, SIPC

0000190305 (Rev 01)

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

REP	ACCOUNT	PAGE
BK08	6540-0350	1 OF 3
TAXPAYER ID: 233-17-4890		

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

FOR QUESTIONS CALL:
(304)252-6221
EDWARD G RAHALL
122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE.
IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.
ISSUE DATE: 01/19/00

DIVIDENDS AND DISTRIBUTIONS

DESCRIPTION		ACTIVITY	AMOUNT	IRS BOX	COUNTRY
EVERGREEN CRT MONEY *	(1)	DIVIDEND	$2,540.92	1	
LIBERTY COL SLCT VAL B		SHORT TERM CAP	$5.38	1	
PHILIP MORRIS COMPANIES		DIVIDEND	$88.00	1	
VK PACE FUND CL B ?*		SHORT TERM CAP	$264.87	1	
TOTAL DIVIDENDS			$2,899.17		
LIBERTY COL SLCT VAL B		20% RATE GAIN	$1,106.09	2A	
VK PACE FUND CL B ?*		20% RATE GAIN	$1,484.44	2A	
TOTAL CAPITAL GAINS			$2,590.53		

IRS BOX	1099-DIV -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-DIV, OMB NO. 1545-0110	
1.	ORDINARY DIVIDENDS	$2,899.17
2A.	TOTAL CAPITAL GAINS DISTRIBUTIONS	$2,590.53
2B.	28 % RATE GAIN	$0.00
2C.	UNRECAP 1250 GAIN	$0.00
2D.	SECTION 1202 GAIN	$0.00
3.	NONTAXABLE DISTRIBUTIONS	$0.00
4.	FEDERAL INCOME TAX WITHHELD	$0.00
5.	INVESTMENT EXPENSES	$0.00
6.	FOREIGN TAX PAID	$0.00
8.	LIQUIDATION DISTRIBUTIONS	$0.00

(1) INCLUDES A SERVICE FEE OF $117.25 THAT MAY BE DEDUCTIBLE

SALOMON SMITH BARNEY

A member of citigroup

Ref: 0L007597 00042525

Select Client Statement

December 1 - December 31, 1999

685L990250072500000 7597 298365AI01 SELFO617A
N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
2269 RAYBURN BUILDING
WASHINGTON DC 20515-0005

SALOMON SMITH BARNEY INC.
Your Financial Consultant

PETER T. JOSEPH
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
570-421-3100

Select Service Center: 1-800-423-7246
Branch: 800-445-2291

Account number 685-00725-10 025

Copies of this statement have also been sent to:

JAMES T. SHEPHERD
ALAN BLAKE
NICK JOE RAHALL II

Account value

	Last period	This period	%
Cash balance	$ .08	$ 120.14	.02
Money funds	61,272.64	92,613.53	13.46
Accrued money fund dividends	161.08	46.81	.01
Common stocks & options	508,757.24	531,120.20	86.53
Net value	$ 570,211.04	$ 613,900.67	100

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .20	$ 4.58	$ 0.00
Dividends	1,488.00	5,129.00	0.00
Money funds earnings	515.80	3,477.83	0.00
Total	$ 2,004.80	$ 8,610.42	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 1,820.51 LT
		$ 0.00 ST
Unrealized gain or (loss)	370,065.54	Not applicable

SALOMON SMITH BARNEY

A member of citigroup

Ref: 00007587 00042520

Select Client Statement

December 1 - December 31, 1999

N JOE RANALLI II ACF

Account number 645-00725-10 025

Cash and money funds balance

	This period	This year
Opening balance	$ 81,272.74	
Withdrawals	-543.88	-2,174.98
Interest credited	.20	
Dividends credited	1,499.00	
Money funds earnings reinvested	515.60	
Closing balance	$ 82,733.66	

Portfolio summary

	This period	Year-to-date
Opening value of securities	560,210.98	560,275.80
+ Opening cash balance	.06	96.05
= Opening portfolio balance	560,211.04	560,371.85
Securities deposited/withdrawn net	0.00	0.00
Capital deposited/withdrawn net	-543.88	-2,174.98
Adjusted opening value	559,667.16	559,196.88
Closing value of securities	613,780.53	613,780.53
+ Closing cash balance	120.14	120.14
= Closing portfolio value	613,900.67	613,900.67

Note: Securities deposited/withdrawn net = The value of securities on the day they were debited from or credited to the account as reflected in the "Other security activity" section.

Capital deposited/withdrawn net = Cash withdrawals and deposits, credit card payments, FMA Card activity, checks written, and Money funds/Insured Deposit Account℠ transfers.

Portfolio details

The values of your holdings are as of 12/31/99. Please note, unrealized gain/(loss) is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Money funds

Number of shares	Description	Current value	Accrued dividends	Annualized % dividend Yield/Anticipated income (annualized)
82,613.82	SB MONEY FUNDS CASH PORT CL A	$ 82,613.82	$ 48.81	5.17% $ 4,271.11
Total money funds		$ 82,613.82	$ 48.81	5.17% $ 4,271.11

Common stocks & options

Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated income (annualized)
400	AMERICAN EXPRESS CO SYMBOL: AXP/RATING: B+	05/13/96	$ 13,403.33	$ 33.016	$ 166.25	$ 66,500.00	$ 53,096.67	LT	.641 % $ 426.00
600	CHASE MANHATTAN CORP NEW SYMBOL: CMB/RATING: B	03/24/99	39,221.16	48.125	77.000	46,012.00	17,291.84	LT	2.111 $ 694.00
400	COCA-COLA CO SYMBOL: KO/RATING: A+	12/29/93	8,941.28	22.257	56.25	22,500.00	14,258.72	LT	1.000 $ 356.00
300	EASTMAN KODAK CO SYMBOL: EK/RATING: B	09/29/93	9,934.14	49.67	68.25	13,350.00	3,415.86	LT	2.996 $ 302.00

SALOMON SMITH BARNEY
A member of citigroup

Ref: 00007597 00042527

Select Client Statement
December 1 - December 31, 1999

N JOE RAHALL II ACF — Account number 685-00725-10 025

Common stocks & options *continued*

Quantity	Description	Date acquired	Cost	Share cost	Current share price	Current value	Unrealized gain/(loss)		Average % Yield/Anticipated Income (annualized)
800	FEDERAL HOME LN MTG CORP SYMBOL: FRE/RATING: A+	11/23/94	$ 9,771.24	$ 12.031	$ 47.063	$ 37,650.40	$ 27,879.16	LT	1.274% $ 480.00
800	HOME DEPOT INC SYMBOL: HD/RATING: A+ Stock split pending	05/20/93	14,184.26	15.541	103.125	82,812.50	78,628.24	LT	.185 144.00
475	HOMEFED CORP NEW SYMBOL: HFDC	08/21/98	86.83	.179	.875	415.63	330.80	LT	
600	HOUSEHOLD INTERNATIONAL INC SYMBOL: HI/RATING: B+	02/03/95	12,518.17	13.705	37.25	33,825.00	21,009.83	LT	1.825 612.00
600	LEUCADIA NATIONAL CORP SYMBOL: LUK/RATING: B	06/01/95	10,095.09	16.825	23.125	13,875.00	3,779.91	LT	0.632 840.00
497	MCI WORLDCOM INC SYMBOL: WCOM/RATING: B Stock split pending	01/25/79	267.00	.577	79.594	39,568.47	39,271.47	LT	
800	MCDONALDS CORP SYMBOL: MCD/RATING: A+	08/22/94	10,729.48	13.187	40.313	32,250.40	21,520.92	LT	.493 160.00
1,200	PFIZER INC SYMBOL: PFE/RATING: A	06/18/91	5,918.71	4.929	32.438	38,925.60	33,006.89	LT	1.109 432.00
600	TIME WARNER HOLDINGS CO SYMBOL: TWX/RATING: B-	01/18/93	9,873.30	16.187	72.313	43,387.80	33,514.41	LT	.348 168.00
400	VIACOM INC CL B SYMBOL: VIAB/RATING: B-	08/30/95	9,822.26	24.187	60.438	24,175.20	14,352.86	LT	
300	WM WRIGLEY JR CO SYMBOL: WWY/RATING: A+	05/23/96	16,162.13	53.154	62.938	24,881.40	8,719.27	LT	1.688 420.00
Total common stocks and options			$ 191,534.68			$ 631,120.20	$ 0.00	ST	.00
						$ 370,086.54	$ 0.00	LT	$ 8,292.00
Total portfolio value			$ 243,848.18			$ 613,732.72	$ 0.00	ST	.01
						$ 370,086.54	$ 0.00	LT	$ 8,823.11

Based on information supplied by your Financial Consultant.

SALOMON SMITH BARNEY

A member of citigroup

Corrected Copy as of 02/07/00
Ref: 00000826 00007562

Select Client Statement Forms 1099 for 1999

N JOE RAHALL II ACF

Account Number 685-00725-10 025 SS # 233-17-4890

Payer	*Your Financial Consultant*	
SALOMON SMITH BARNEY INC.	PETER T. JOSEPH	N JOE RAHALL II ACF
388 GREENWICH STREET	**SALOMON SMITH BARNEY INC.**	NICK JOE RAHALL III UGTMA/WVA
NEW YORK, NEW YORK 10013	701 MAIN STREET	2269 RAYBURN BUILDING
Attn: Tax Reporting Service Center	SUITE 100	WASHINGTON DC
Tax ID Number 11-2418191	STROUDSBURG PA 18360	20515-0005
	Branch Office . 570-421-3100	

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

1099-DIV Dividends and Distributions 1999

(OMB No.1545-0110)

Ordinary dividends	Total capital gain distributions	28% rate gain	Unrecaptured sec. 1250 gain	Section 1202 gain	Nontaxable distributions
$ 7,657.83					
Box 1	Box 2a	Box 2b	Box 2c	Box 2d	Box 3

Federal income tax withheld	Investment expenses	Foreign tax paid	Foreign country or US possession	Liquidation distributions - cash	Liquidation distributions - non cash
				$ 8,148.00	
Box 4	Box 5	Box 6	Box 7	Box 8	Box 9

SALOMON SMITH BARNEY
A member of citigroup

Corrected Copy as of 02/07/00
Ref: 00000826 00007565

Select Client Statement
1999 Year End Summary

N JOE RAHALL II ACF
Account Number 685-00725-10 025 SS # 233-17-4890

Details of Long Term Gain (Loss) 1999

This section shows your sales of securities during the year. The "Sale Proceeds" column excludes any accrued income you may have received. Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Reference number	Quantity	Security Description	Opening Trade Date	Closing Trade Date	Sale Proceeds	Cost	(Loss)	Gain
125000100	600	LEUCADIANATIONALCORP GENERATED- CIN AS OF 05/22/99	06/01/95	05/22/99	$ 7,200.00	$ 5,379.49		$ 1,820.51 [b]
Total					$ 7,200.00	$ 5,379.49		$ 1,820.51

[b] *Based on information supplied by your Financial Consultant.*

Details of Deposits and Withdrawals 1999

This section reflects any deposits or withdrawals made to your account during the year.

Withdrawals

Reference number	Date	Description	Referral number	Amount
220000100	03/16/99	INVESTMENT & ADVISORY SERVICES FROM 03/01/99 TO 05/31/99		$ 549.95
220000300	08/17/99	INVESTMENT & ADVISORY SERVICES FROM 08/01/99 TO 11/30/99		535.99
220000200	06/16/99	INVESTMENT & ADVISORY SERVICES FROM 06/01/99 TO 08/31/99		$ 545.04
220000400	12/17/99	INVESTMENT & ADVISORY SERVICES FROM 12/01/99 TO 02/29/00		543.99
Total				$ 2,174.96

1 - 1 9 9 9 Y E A R E N D - S U M M A R Y

FIRST UNION Securities

Client Statement

Attachment 15 - p.1

Account Of:
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT

Capital Resource Account

Mail To:
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

Account Number
8K08 6540-1050

December 1, 1999 - December 31, 1999
Page 1 of 5

Investment Objective
GROWTH & INCOME (QUALITY)

Your Financial Advisor
EDWARD G RAHALL

122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802

304-252-6221

Tax I.D. No.
233-25-9977

OUR CHIEF INVESTMENT STRATEGIST, RAO CHALASANI, HAS PUBLISHED HIS OUTLOOK FOR OPPORTUNITIES IN THE YEAR 2000. READ INVESTOR'S SPECTRUM--THEN TALK WITH YOUR FINANCIAL ADVISOR.

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Portfolio Summary

COMPOSITION	ENDING BALANCE MARKET VALUE	ENDING BALANCE PERCENT OF PORTFOLIO	BEGINNING BALANCE MARKET VALUE	BEGINNING BALANCE PERCENT OF PORTFOLIO
CASH AND MONEY MARKET	5,924.15	6.3	12,751.10	14.0
BONDS	24,021.20	25.6	24,205.26	26.5
UNIT INVESTMENT TRUST	3,250.00	3.5	3,550.00	3.9
STOCKS	11,437.47	12.2	11,176.54	12.2
MUTUAL FUNDS	49,071.55	52.4	39,685.42	43.4
TOTAL ESTIMATED PORTFOLIO VALUE	93,704.37	100.0	91,368.32	100.0

Income Summary

DESCRIPTION	THIS PERIOD	YEAR TO DATE
MONEY MARKET FUND DIVIDENDS	56.62	160.80
CASH DIVIDENDS	244.30	415.72
OTHER INTEREST	86.20	904.55
TOTAL INCOME	387.12	1,481.07

Return of Principal Summary

DESCRIPTION	THIS PERIOD	YEAR TO DATE
RETURN OF PRINCIPAL	382.95	4,506.68
TOTAL RETURN OF PRINCIPAL	382.95	4,506.68

---CONTINUED ON NEXT PAGE---

FIRST UNION Securities

Client Statement

15 - p.2

Account Of:
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT

Account Number
8K08 6540-1050

December 1, 1999 - December 31, 1999
Page 2 of 5

Current Portfolio

TYPE/DESCRIPTION	SYMBOL	QUANTITY	CURRENT PRICE	ESTIMATED VALUE	ESTIMATED ANNUAL INCOME	CURRENT YIELD
Cash and Money Market						
EVERGREEN US GOVT SECS PORTFOLIO 4.60% AVERAGE YIELD 11/16/99-12/31/99	*	5,924.15	1.0000	5,924.15	272	4.6
TOTAL CASH AND MONEY MARKET				5,924.15	272	N/A
Bonds						
FICO STRIP SR 1 05/11/01 INTEREST PMT CPN 0.000% DUE 05/11/01 DTD 05/18/88		5,000	91.4350	4,571.75	0	0.0
FICO STRIP SR 16 10/5/02 INTEREST PMT CPN 0.000% DUE 10/05/02		10,000	83.0200	8,302.00	0	0.0
CERT ACCRUAL SER M 11/02 TREAS SECS INT PMT CPN 0.000% DUE 11/15/02		5,000	83.5570	4,177.85	0	0.0
MORGAN STANLEY 87 K3 MULTICLASS CMO CPN 8.425% DUE 09/20/18 DTD 05/20/87 FC 09/20/87 CALL 06/20/99 @ 100.000 ACCRUED INT 2.46 REMAIN BAL 951.04 DEC FACTOR .31701596		3,000	100.0000	951.04	80	8.4
FNMA 91 6ZD 9% COMPOUNDED RATE MULTICLASS CMO CPN 9.000% DUE 01/25/21 DTD 01/01/91 FC 02/25/91 REMAIN BAL 4,506.71 DEC FACTOR 1.50223869	PAC	3,000	100.0000	4,506.71	405	9.0
FNMA 92 11E MULTICLASS CMO CPN 8.000% DUE 12/25/21 DTD 01/01/92 FC 02/25/92 ACCRUED INT 10.08 REMAIN BAL 1,511.85 DEC FACTOR .50395244		3,000	100.0000	1,511.85	120	8.0
$12 IS THE TOTAL ESTIMATED ACCRUED INTEREST AS DETAILED ABOVE. $6,969 IS THE TOTAL REMAINING BALANCE OF GNMA AND OTHER FACTORED SECURITIES.						
TOTAL BONDS				24,021.20	606	2.5
Unit Investment Trusts						
MORTGAGE SECURITIES TR CMO SER 15 INTERMEDIATE PORTFOLIO UNIT MONTHLY		5,000	.6500	3,250.00	235	7.2

---CONTINUED ON NEXT PAGE---

Account carried by First Clearing Corporation member New York Stock Exchange, SIPC

Current Portfolio continued

TYPE/DESCRIPTION	SYMBOL	QUANTITY	CURRENT PRICE	ESTIMATED VALUE	ESTIMATED ANNUAL INCOME	ESTIMATED CURRENT YIELD
Unit Investment Trusts						
TOTAL UIT				3,250.00	235	7.2
Stocks						
CBRL GROUP INC	CBRL	300	9.7031	2,910.93	6	0.2
DISNEY WALT COMPANY	DIS	200	29.2500	5,850.00	42	0.7
LONE STAR STEAKHOUSE SALOON	STAR	300	8.9218	2,676.54	0	0.0
TOTAL STOCKS				11,437.47	48	0.4
Mutual Funds						
LIBERTY FUNDS TRUST VI US GROWTH & INOCME FD	CFGBX	574.9200	20.1000	11,555.89	0	0.0
MFS RESEARCH GROWTH & INCOME FD CL B	MRGBX	615.3850	17.0300	10,480.00	0	0.0
MASSACHUSETTS INVS TR SH BEN INT CL B	MITBX	507.3920	20.6900	10,497.94	2	0.0
VAN KAMPEN SER FD INC VALUE FD CL B	MVUBX	514.5730	9.3500	4,811.25	0	0.0
VK PACE FUND CL B	ACPBX	859.7120	13.6400	11,726.47	0	0.0
TOTAL MUTUAL FUNDS				49,071.55	2	0.0

Estimated Annual Income and Current Yield refer to dividends and interest income only, and typically do not reflect total return.

TOTAL ESTIMATED PORTFOLIO VALUE			93,704.37	1,164	1.2

Activity Summary

	ADDITIONS	SUBTRACTIONS	NET AMOUNT
BEGINNING CASH AND MONEY MARKET			12,751.10
DIVIDENDS AND INTEREST	387.12	.00	387.12
SECURITY SALES	17,657.78	.00	17,657.78
SECURITY PURCHASES	.00	27,755.25	-27,755.25
OTHER ACTIVITY	2,883.40	.00	2,883.40
TOTALS	20,928.30	27,755.25	-6,826.95
ENDING CASH AND MONEY MARKET			5,924.15

Account Activity

DATE	TRANSACTION	QUANTITY	DESCRIPTION	TRANSACTION PRICE	AMOUNT
Dividends and Interest					
12 01	DIVIDEND		COLUMBIA/HCA HEALTHCARE CORP 120199 200		4.00
12 17	DIVIDEND		DISNEY WALT COMPANY 121799 200		42.00
12 17	SHRT TRM GAIN		VK PACE FUND CL B - 121599 670.74800 AS OF 12/15/99		198.30

---CONTINUED ON NEXT PAGE---

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

REP	ACCOUNT	PAGE
BK08	6540-1050	1 OF 4
TAXPAYER ID: 233-25-9977		

42 281766 0000-0063 98TED 4

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

FOR QUESTIONS CALL:
(304)252-6221
EDWARD G RAHALL
122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.
CORRECTION: 03/10/00

DIVIDENDS AND DISTRIBUTIONS

DESCRIPTION		ACTIVITY	AMOUNT	IRS BOX	COUNTRY
CBRL GROUP INC		DIVIDEND	$3.50	1	
EVERGREEN US GOVT *	(1)	DIVIDEND	$168.33	1	
COLUMBIA/HCA HLTH CARE		DIVIDEND	$16.00	1	
DISNEY WALT COMPANY		DIVIDEND	$42.00	1	
VK COMSTOCK FD CL B		DIVIDEND	$47.38	1	
VK COMSTOCK FD CL B		SHORT TERM CAP	$108.54	1	
VK PACE FUND CL B ?*		SHORT TERM CAP	$198.30	1	
TOTAL DIVIDENDS			$584.05		
LIBERTY VI US G & I CL B		20% RATE GAIN	$619.60	2A	
MFS RESEARCH FD CL B		20% RATE GAIN	$769.53	2A	
VK COMSTOCK FD CL B		20% RATE GAIN	$92.15	2A	
VK PACE FUND CL B ?*		20% RATE GAIN	$1,111.32	2A	
TOTAL CAPITAL GAINS			$2,592.60		

IRS BOX 1099-DIV -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-DIV, OMB NO. 1545-0110	
1. ORDINARY DIVIDENDS	$584.05
2A. TOTAL CAPITAL GAINS DISTRIBUTIONS	$2,592.60
2B. 28 % RATE GAIN	$0.00
2C. UNRECAP 1250 GAIN	$0.00
2D. SECTION 1202 GAIN	$0.00
3. NONTAXABLE DISTRIBUTIONS	$0.00
4. FEDERAL INCOME TAX WITHHELD	$0.00
5. INVESTMENT EXPENSES	$0.00
6. FOREIGN TAX PAID	$0.00
8. LIQUIDATION DISTRIBUTIONS	$0.00

(1) INCLUDES A SERVICE FEE OF $7.53 THAT MAY BE DEDUCTIBLE

INTEREST INCOME

DESCRIPTION	ACTIVITY	AMOUNT	IRS BOX	COUNTRY
MST CMO SER 15 M 3/20/24	INTEREST	$299.75	1	

IRS BOX 1099-INT -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-INT, OMB NO. 1545-0112	
1. INTEREST INCOME NOT INCLUDED IN IRS BOX 3	$299.75
3. INTEREST ON U.S. TREASURY OBLIGATIONS	$0.00
4. FEDERAL INCOME TAX WITHHELD	$0.00
6. FOREIGN TAX PAID	$0.00

FIRST CLEARING CORPORATION **1999** **15 - p.5**

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II AS CUST FOR	REP ACCOUNT	PAGE
SUZANNE NICOLE RAHALL UNDER	BK08 6540-1050	2 OF 4
THE WV GIFTS TO MINORS ACT	TAXPAYER ID: 233-25-9977	

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CORRECTION: 03/10/00

ORIGINAL ISSUE DISCOUNT

DESCRIPTION	ACTIVITY	AMOUNT	IRS BOX
FICO 1 0Z05/11/01 INT	OID LONG TERM	$205.65	1
FICO 16 0Z10/05/02 INT	OID LONG TERM	$384.40	1
TOTAL ORIGINAL ISSUE DISCOUNT		$590.05	
CATS SER M 0Z11/02 INT	OID LONG TERM	$192.20	6

IRS BOX	1099-OID -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-OID, OMB NO. 1545-0117	
1.	ORIGINAL ISSUE DISCOUNT	$590.05
2.	OTHER PERIODIC INTEREST	$0.00
4.	FEDERAL INCOME TAX WITHHELD	$0.00
6.	OID ON U.S. TREASURIES	$192.20

FIRST CLEARING CORPORATION

1999 1099-OID, REMIC

FIRST UNION SECURITIES INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL IDENTIFYING NUMBER: 23-2384840

0605 276875 0004-0605 1810471 2

ACCOUNT NUMBER : BK08 6540-1050
TAX ID NUMBER : 233-25-9977

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

FOR QUESTIONS CALL:
EDWARD G RAHALL
122 MAIN STREET
POST OFFICE BOX 1328
BECKLEY, WEST VIRGINIA 25802
304-252-6221

PAGE 1 OF 3

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ORIGINAL ISSUE DISCOUNT (SUBSTITUTE FOR IRS FORM 1099-OID.REMIC OMB NO. 1545-0117)

DESCRIPTION

CUSIP: 31358FZB8
FNMA 91 6ZD PAC
9% COMPOUNDED RATE --ACCRUED OID--
CPN 9.000% DUE 01/25/21 $553.84

01/01 3,000.00 POSITION

NOTE: ACCRUED INTEREST AND/OR ACCRUED OID WAS CALCULATED USING THE FOLLOWING TABLE.

BEG DATE	END DATE	DAYS	QUANTITY	ACCR INT	ACCR OID	ACCR EXP	INT ACCRUED	OID ACCRUED	ADJ PRICE	DISC FRAC
01/01	01/24	24	3000.00		$43.33		.00000000	.60185840	1977.8664	.01190750
01/25	02/24	30	3000.00		$51.31		.00000000	.57009920	1991.7091	.01186750
02/25	03/24	30	3000.00		$54.25		.00000000	.60282710	2008.8121	.01296450
03/25	04/24	30	3000.00		$51.20		.00000000	.56884400	1971.1227	.01285300
04/25	05/24	30	3000.00		$51.95		.00000000	.57726170	1902.7543	.01353750
05/25	06/24	30	3000.00		$45.45		.00000000	.50500580	1805.6744	.01250970
06/25	07/24	30	3000.00		$45.12		.00000000	.50129700	1760.9390	.01275770
07/25	08/24	30	3000.00		$44.88		.00000000	.49871380	1707.6082	.01311620
08/25	09/24	30	3000.00		$42.76		.00000000	.47506480	1641.7903	.01302490
09/25	10/24	30	3000.00		$41.19		.00000000	.45771520	1583.4390	.01304200
10/25	11/24	30	3000.00		$38.65		.00000000	.42946450	1527.3708	.01271270
11/25	12/24	30	3000.00		$36.38		.00000000	.40427150	1487.1149	.01232080
12/25	12/31	6	3000.00		$7.37		.00000000	.40934160	1463.4035	.00254130

ASSET COMPOSITION	1ST QRTR	2ND QRTR	3RD QRTR	4TH QRTR
IRC SECTION 593 :	95%	95%	95%	95%
IRC SECTION 7701 :	95%	95%	95%	95%
IRC SECTION 856 :	95%	95%	95%	95%

THE INFORMATION PROVIDED TO YOU IN THIS STATEMENT WAS OBTAINED FROM THE ISSUER, ITS TRUSTEE OR AN AGENT OF THE ISSUER. WE ARE UNABLE TO VERIFY THE ACCURACY OF THE INFORMATION SUPPLIED TO US THEREFORE WE CANNOT GIVE ASSURANCE OF THE CORRECTNESS OF THIS INFORMATION, NOR CAN WE GIVE ASSURANCE THAT THIS INFORMATION WILL NOT SUBSEQUENTLY CHANGE.

FIRST UNION SECURITIES INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL IDENTIFYING NUMBER: 23-2384840

ACCOUNT NUMBER : 8K08 6540-1050
TAX ID NUMBER : 233-25-9977

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

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304-252-6221

PAGE 2 OF 3

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ORIGINAL ISSUE DISCOUNT (SUBSTITUTE FOR IRS FORM 1099-OID,REMIC OMB NO. 1545-0117)
DESCRIPTION

CUSIP: 31358LBZ8
FNMA 92 11E
MULTICLASS CMO --ACCRUED INT--
DTD 01/01/92 FC 02/25/92 $149.91
01/01 3,000.00 POSITION
NOTE: ACCRUED INTEREST AND/OR ACCRUED OID WAS CALCULATED USING THE FOLLOWING TABLE.

BEG DATE	END DATE	DAYS	QUANTITY	ACCR INT	ACCR OID	ACCR EXP	INT ACCRUED	OID ACCRUED	ADJ PRICE	DISC FRAC
01/01	01/24	24	3000.00	$12.87			.17878840	.00000000	779.6353	.01318850
01/25	02/24	30	3000.00	$15.16			.16847980	.00000000	733.2462	.01289840
02/25	03/24	30	3000.00	$14.68			.16306580	.00000000	708.8836	.01329960
03/25	04/24	30	3000.00	$13.86			.15400630	.00000000	668.1158	.01324390
04/25	05/24	30	3000.00	$13.22			.14688460	.00000000	636.0679	.01345270
05/25	06/24	30	3000.00	$12.50			.13884510	.00000000	599.8902	.01342730
06/25	07/24	30	3000.00	$11.91			.13229920	.00000000	570.4334	.01351220
07/25	08/24	30	3000.00	$11.35			.12610640	.00000000	542.5661	.01348560
08/25	09/24	30	3000.00	$10.91			.12118850	.00000000	520.4355	.01332630
09/25	10/24	30	3000.00	$10.66			.11839470	.00000000	507.8635	.01327680
10/25	11/24	30	3000.00	$10.49			.11654310	.00000000	499.5314	.01338620
11/25	12/24	30	3000.00	$10.28			.11426550	.00000000	488.2821	.01344640
12/25	12/31	6	3000.00	$2.02			.11198940	.00000000	479.0397	.00270590

ASSET COMPOSITION	1ST QRTR	2ND QRTR	3RD QRTR	4TH QRTR
IRC SECTION 593 :	95%	95%	95%	95%
IRC SECTION 7701 :	95%	95%	95%	95%
IRC SECTION 856 :	95%	95%	95%	95%

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FIRST CLEARING CORPORATION 1999 1099-OID, REMIC

FIRST UNION SECURITIES INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL IDENTIFYING NUMBER: 23-2384840

ACCOUNT NUMBER : BK08 654C-1050
TAX ID NUMBER : 233-25-9977

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
106 MAIN ST
BECKLEY WV 25801-4611

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304-252-6221

PAGE 3 OF 3

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ORIGINAL ISSUE DISCOUNT (SUBSTITUTE FOR IRS FORM 1099-OID REMIC OMB NO. 1545-0117)
DESCRIPTION

CUSIP: 617909AD8
MORGAN STANLEY 87 K3
MULTICLASS CMO --ACCRUED OID--
DTD 05/20/87 FC 09/20/87 $103.27
01/01 3,000.00 POSITION

IRS BOX	1099-OID -- TOTALS FOR TAX YEAR 1999	
1.	ORIGINAL ISSUE DISCOUNT	$657.11
2.	OTHER PERIODIC INTEREST	$149.91
7.	INVESTMENT EXPENSE	$0.00

BEG DATE	END DATE	DAYS	QUANTITY	ACCR INT	ACCR OID	ACCR EXP	INT ACCRUED	OID ACCRUED	ADJ PRICE	DISC FRAC
01/01	03/19	79	3000.00		$26.87		.00000000	.11339450	480.0373	.04826330
03/20	06/19	90	3000.00		$26.94		.00000000	.09979570	423.3513	.05528660
06/20	09/19	90	3000.00		$24.82		.00000000	.09191070	389.3385	.05599940
09/20	12/19	90	3000.00		$22.21		.00000000	.08227440	348.7503	.05654200
12/20	12/31	11	3000.00		$2.43		.00000000	.07377030	316.5814	.00692250

ASSET COMPOSITION	1ST QRTR	2ND QRTR	3RD QRTR	4TH QRTR
IRC SECTION 593 :	95%	95%	95%	95%
IRC SECTION 7701 :	95%	95%	95%	95%
IRC SECTION 856 :	95%	95%	95%	95%

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.05210.

Attachment 16

First Clearing Corporation

10700 WHEAT FIRST DRIVE, GLEN ALLEN, VA 23060

PAYER'S FEDERAL IDENTIFICATION NUMBER
23-2384840

NICK JOE RAHALL II SEP IRA
FCC AS CUSTODIAN
U/A DTD 12/17/86
216 1/2 MAIN ST
BECKLEY WV 25801-4613

FIRST UNION SECURITIES

YOUR FINANCIAL CONSULTANT:
EDWARD G RAHALL
(304) 252-6221

Account No.	Recipient's ID No.	Page
BK08 6539-9300	236-78-8645	1

ISSUE DATE: 01/22/2000

IRA PORTFOLIO HOLDING VALUATION
AS OF DECEMBER 31, 1999

SECURITY DESCRIPTION	QUANTITY	MARKET PRICE	FACTOR	MARKET VALUE
EVERGREEN US GOVT SECS PORTFOLIO	27.93000	1.0000		27.93
FICO STRIP SR 1 11/11/11 INTEREST PMT CPN 0.000% DUE 11/11/11 DTD 05/18/88	20,000.00000	41.6840	1.00000	8,336.80
FICO STRIP SR 5 02/08/10 INTEREST PMT CPN 0.000% DUE 02/08/10 DTD 08/01/88	15,000.00000	47.6880	1.00000	7,153.20
FICO STRIP 1 5/11/12 INTEREST PMT CPN 0.000% DUE 05/11/12 DTD 05/18/88	20,000.00000	40.0760	1.00000	8,015.20
LASALLE BANK NA CD CHICAGO IL ACT/365 FDIC INSURED TO 100M CPN 0.000% DUE 12/14/18 DTD 12/14/98	30,000.00000	21.1000	1.00000	6,330.00
LIBERTY FDS TR III COLONIAL SELECT VALUE FD CL B	350.17900	20.6000		7,213.68
MFS SER TR I NEW DISCOVERY FD-CL B	436.61500	21.6700		9,461.44
US TREAS STRIPS 08/13 INTEREST PMT CPN 0.000% DUE 08/15/13	35,000.00000	39.5480	1.00000	13,841.80

PORTFOLIO HELD ON FCC PREMISES : $60,380.05

TOTAL IRA PORTFOLIO VALUATION : $60,380.05

YOUR YEAR-END VALUE IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE.
(PLEASE SEE THE REVERSE SIDE OF THIS DOCUMENT FOR ADDITIONAL INFORMATION.)
Member New York Stock Exchange, Inc. and SIPC

[redacted]

Attachment 17 - p.1

BUCKMAN, BUCKMAN & REID, INC.

Securities Broker/Dealer

75 WEST FRONT STREET
RED BANK, NEW JERSEY 07701

Client Statement

Account Of:
NICK RAHALL II
SW APT 409N

Medallion Account

Mail To: 22903 1- 1 51672 FLE
NICK RAHALL II
SW APT 409N
1301 DELWARE AVE
WASHINGTON DC 20024

Account Number
KH03 7174-9050

October 1, 1999 - December 31, 1999
Page 1 of 1

Your Registered Representative
MARK ELLIOTT

30 BROAD STREET, 17TH FLOOR
NEW YORK, NY 10004

212-809-8655

Tax I.D. No.
236-78-8645

Current Portfolio

TYPE/DESCRIPTION	SYMBOL	QUANTITY	CURRENT PRICE	ESTIMATED VALUE	ESTIMATED ANNUAL INCOME	ESTIMATED CURRENT YIELD
Cash and Money Market						
EVERGREEN US GOVT SECS PORTFOLIO	*	1.47	1.0000	1.47	0	4.6
4.65% AVERAGE YIELD 11/16/99-12/31/99						
TOTAL CASH AND MONEY MARKET				1.47	0	N/A

Income Summary

DESCRIPTION	THIS PERIOD	YEAR TO DATE
MONEY MARKET FUND DIVIDENDS	.00	.03
CASH DIVIDENDS	.00	135.00
TOTAL INCOME	.00	135.03

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTATIONS. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. CURRENT PRICES AND ESTIMATED ANNUAL INCOME ARE PROVIDED ONLY AS A GENERAL GUIDE FOR YOUR PORTFOLIO.

22903 001-001 0001,2 51672 FLE

FIRST CLEARING CORPORATION 1999

FIRST CLEARING CORPORATION
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

BUCKMAN, BUCKMAN & REID

REP	ACCOUNT	PAGE
KH03	7174-9050	1 OF 3
TAXPAYER ID: 236-78-8645		

NICK RAHALL II
SW APT 409N
1301 DELWARE AVE
WASHINGTON DC 20024

FOR QUESTIONS CALL:
(212)809-8655
MARK ELLIOTT
30 BROAD STREET, 17TH FLOOR
NEW YORK, NY 10004

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ISSUE DATE: 01/19/00

DIVIDENDS AND DISTRIBUTIONS

DESCRIPTION	ACTIVITY	AMOUNT	IRS@BOX	COUNTRY
ALCAN ALUMINUM LTD NEW	DIVIDEND	$135.00	1	CA
EVERGREEN US GOVT SECS	DIVIDEND	$0.03	1	
TOTAL DIVIDENDS		$135.03		
ALCAN ALUMINUM LTD NEW	FOREIGN W/H	$20.25DR	6	CA

IRS BOX 1099-DIV -- TOTALS FOR TAX YEAR 1999
SUBSTITUTE FOR IRS FORM 1099-DIV, OMB NO. 1545-0110

1.	ORDINARY DIVIDENDS	$135.03
2A.	TOTAL CAPITAL GAINS DISTRIBUTIONS	$0.00
2B.	28 % RATE GAIN	$0.00
2C.	UNRECAP 1250 GAIN	$0.00
2D.	SECTION 1202 GAIN	$0.00
3.	NONTAXABLE DISTRIBUTIONS	$0.00
4.	FEDERAL INCOME TAX WITHHELD	$0.00
5.	INVESTMENT EXPENSES	$0.00
6.	FOREIGN TAX PAID	$20.25DR
8.	LIQUIDATION DISTRIBUTIONS	$0.00

FIRST CLEARING CORPORATION 1999

Attachment 18 - p.1

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II	REP ACCOUNT	PAGE
216 1/2 MAIN ST	BK08 6539-9650	2 OF 5
BECKLEY WV 25801-4613	TAXPAYER ID: 236-78-8645	

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ISSUE DATE: 01/19/00

PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
AIM SMALL CAP OPPOR CL B	11/29/99	SALE	992.51	19.0100	$18,457.63
CUSIP: 008883209					
AMERICA ONLINE INC DEL	04/19/99	SALE	100.00	132.1875	$13,142.30
CUSIP: 02364J104					
AT HOME CORP	10/07/99	SALE	100.00	49.0000	$4,818.83
CUSIP: 045919107					
L-3 COMMUNICATIONS HLDGS	04/12/99	SALE	100.00	47.6875	$4,677.59
CUSIP: 502424104					
LASON INC	03/12/99	SALE	100.00	58.3750	$5,746.30
CUSIP: 51808R107					
LASON INC	04/14/99	SALE	100.00	49.1250	$4,831.33
CUSIP: 51808R107					
LASON INC	07/14/99	SALE	200.00	45.0000	$8,847.94
CUSIP: 51808R107					
MRV COMMUNICATIONS INC	05/03/99	SALE	2,000.00	12.0625	$23,738.21
CUSIP: 553477100					
MP3 COM INC	11/03/99	SALE	300.00	56.7500	$16,778.93
CUSIP: 62473M109					
ONEMAIN.COM INC	07/14/99	SALE	500.00	28.1875	$13,848.21
CUSIP: 68267P109					
PRODIGY COMMUNICATIONS	11/19/99	SALE	500.00	28.6250	$14,151.17
CUSIP: 74283P107					
RICHLAND SC HOSP 0Z12	12/28/99	SALE	15,000.00	46.5000	$6,969.00
CUSIP: 763634GE6					
SIRIUS SATELLITE RADIO	12/27/99	SALE	200.00	35.5000	$6,923.26
CUSIP: 82966U103					
SOURCE MEDIA INC	10/08/99	SALE	500.00	8.6250	$4,223.36
CUSIP: 836153304					
US SEARCH CORP COM	09/10/99	SALE	1,000.00	9.8750	$9,710.36
CUSIP: 903404101					
VA LINUX SYSTEMS INC	12/30/99	SALE	50.00	187.5000	$9,277.58
CUSIP: 91819B105					
W VA ECON EDGEWOOD 5Z99	11/01/99	REDEMPTION	20,000.00		$20,000.00
CUSIP: 956486AL8					
WINK COMMUNICATIONS INC	09/29/99	SALE	100.00	43.1250	$4,229.17
CUSIP: 974168106					
WINK COMMUNICATIONS INC	10/25/99	SALE	200.00	37.3750	$7,336.40
CUSIP: 974168106					
WINK COMMUNICATIONS INC	11/10/99	SALE	100.00	39.7500	$3,880.62
CUSIP: 974168106					
WORLDGATE COMMUNICATIONS	06/15/99	SALE	100.00	38.6875	$3,790.71
CUSIP: 98156L307					
WORLDGATE COMMUNICATIONS	06/24/99	SALE	100.00	42.2500	$4,147.46
CUSIP: 98156L307					
WORLDGATE COMMUNICATIONS	11/18/99	SALE	500.00	31.6250	$15,606.85
CUSIP: 98156L307					
XM SATELLITE RADIO	12/14/99	SALE	300.00	28.5000	$8,357.56
CUSIP: 983759101					
TOTAL PROCEEDS					$233,490.77

<<<< CONTINUED ON THE NEXT PAGE >>>>

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II	REP ACCOUNT	PAGE
216 1/2 MAIN ST	BK08 6539-9650	3 OF 5
BECKLEY WV 25801-4613	TAXPAYER ID: 236-78-8645	

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

ISSUE DATE: 01/19/00

PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT

IRS BOX 1099-B -- TOTALS FOR TAX YEAR 1999
SUBSTITUTE FOR IRS FORM 1099-B, OMB NO. 1545-0715

2. GROSS PROCEEDS LESS COMMISSIONS ON STOCK, BONDS, ETC	$233,490.77
4. FEDERAL INCOME TAX WITHHELD	$0.00

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II	REP ACCOUNT	PAGE
216 1/2 MAIN ST	BK08 6539-9650	4 OF 5
BECKLEY WV 25801-4613	TAXPAYER ID: 236-78-8645	

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

ISSUE DATE: 01/19/00

THIS SECTION LISTS MISCELLANEOUS INFORMATION WHICH CAN BE HELPFUL IN THE PREPARATION OF YOUR TAX RETURN. IT LISTS NON FEDERALLY REPORTABLE INCOME WHICH MAY OR MAY NOT BE TAXABLE AT THE STATE OR LOCAL LEVEL. PLEASE REVIEW THIS INFORMATION WITH YOUR TAX ADVISOR.

DESCRIPTION	ACTIVITY	AMOUNT	REF#
BERKELEY CO WV BLDG 6%01	INTEREST	$1,500.00	2
KANAWHA PUTNAM CO 0%16	OID LONG TERM	$1,197.43	2
NC ED DUKE UNIV CAB 0%00	OID LONG TERM	$1,864.76	2
PR ELEC PWR 0.00%17	OID LONG TERM	$3.38	2
RICHLAND SC HOSP 0%12	OID LONG TERM	$418.48	2
TAMPA FL 0.00%05	OID LONG TERM	$1,172.05	2
WV ECON EDGEWOOD 6.50%13	INTEREST	$1,625.00	2
W VA ECON EDGEWOOD 5%99	INTEREST	$1,000.00	2
WEST VIRGINIA ST 4.20%03	INTEREST	$962.50	2
WVA PKWYS AUTH 0.00%04	OID LONG TERM	$741.75	2
TOTAL TAX EXEMPT MUNI BOND INTEREST		$10,485.35	

REF # -- TOTALS FOR TAX YEAR 1999
MISCELLANEOUS INFORMATION TOTALS

1. MARGIN DEBIT INTEREST	$0.00DR
2. FEDERALLY TAX EXEMPT MUNICIPAL BONDS	$10,485.35
3. FEDERALLY TAX EXEMPT DIVIDENDS	$0.00
4. NOT USED AT THIS TIME.....	$0.00
5. INCOME SUBJECT TO ALTERNATIVE MINIMUM TAX	$0.00
6. FEDERALLY TAX EXEMPT INTEREST	$0.00
7. FEDERALLY TAX EXEMPT ACCRUED INTEREST	$0.00
8. MASTER LIMITED PARTNERSHIP DISTRIBUTIONS.....	$0.00
9. ACCRUED INTEREST ON PURCHASES.....	$0.00DR

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II	REP ACCOUNT	PAGE
216 1/2 MAIN ST	BK08 6539-9650	5 OF 5
BECKLEY WV 25801-4613	TAXPAYER ID: 236-78-8645	

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

ISSUE DATE: 01/19/00

THIS SECTION CONTAINS PURCHASE ACTIVITY IN YOUR ACCOUNT.
IT IS PROVIDED FOR YOUR INFORMATION ONLY.

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
<<<< CONTINUED FROM PREVIOUS PAGE >>>>					
MP3 COM INC CUSIP: 62473M109	08/03/99	PURCHASE	100.00	34.1250	$3,493.30
ONEMAIN.COM INC CUSIP: 68267P109	04/29/99	PURCHASE	200.00	32.5000	$6,643.53
ONEMAIN.COM INC CUSIP: 68267P109	05/24/99	PURCHASE	100.00	20.6875	$2,132.09
ONEMAIN.COM INC CUSIP: 68267P109	05/27/99	PURCHASE	200.00	18.2500	$3,751.11
PRODIGY COMMUNICATIONS CUSIP: 74283P107	03/23/99	PURCHASE	200.00	37.7500	$7,710.93
PRODIGY COMMUNICATIONS CUSIP: 74283P107	04/29/99	PURCHASE	100.00	28.1875	$2,899.03
PRODIGY COMMUNICATIONS CUSIP: 74283P107	08/03/99	PURCHASE	200.00	20.5000	$4,205.05
PR ELEC PWR 0.00Z17 CUSIP: 745268JW3	12/23/99	PURCHASE	30,000.00	34.8600	$10,464.00
SIRIUS SATELLITE RADIO CUSIP: 82966U103	11/29/99	PURCHASE	200.00	28.4375	$5,842.81
SOURCE MEDIA INC CUSIP: 836153304	08/04/99	PURCHASE	500.00	9.1250	$4,710.53
US SEARCH CORP COM CUSIP: 903404101	07/28/99	PURCHASE	500.00	10.9375	$5,622.71
US SEARCH CORP COM CUSIP: 903404101	08/03/99	PURCHASE	500.00	8.8125	$4,537.99
VA LINUX SYSTEMS INC CUSIP: 91819B105	12/30/99	PURCHASE	50.00	178.0000	$8,997.10
WINK COMMUNICATIONS INC CUSIP: 974168106	09/28/99	PURCHASE	100.00	39.0000	$3,982.80
WINK COMMUNICATIONS INC CUSIP: 974168106	10/04/99	PURCHASE	100.00	39.7500	$4,054.17
WINK COMMUNICATIONS INC CUSIP: 974168106	10/05/99	PURCHASE	100.00	37.2500	$3,813.49
WINK COMMUNICATIONS INC CUSIP: 974168106	10/14/99	PURCHASE	100.00	29.0000	$2,981.49
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	06/03/99	PURCHASE	100.00	34.5625	$3,539.31
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	06/23/99	PURCHASE	100.00	38.1875	$3,891.61
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	07/20/99	PURCHASE	100.00	44.5625	$4,541.14
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	07/26/99	PURCHASE	100.00	38.9375	$3,980.99
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	10/14/99	PURCHASE	200.00	23.7500	$4,863.74
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	11/11/99	PURCHASE	100.00	20.8125	$2,149.21
XM SATELLITE RADIO CUSIP: 983759101	12/09/99	PURCHASE	300.00	24.7500	$7,597.95
					180,074.24

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Dividends and Interest

Activity	Description	Amount	Income Category
	Total Stocks	9770.85	
	[redacted]	[redacted]	

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
01-15	Sold	9	ABBEY NATIONAL PLC SP ADR	43	366.98	
03-01	Sold	13	ABBEY NATIONAL PLC SP ADR	49.3750	529.86	
10-29	Sold	84	ABITIBI CONSOLIDATED INC	11.7500	986.96	
07-01	Sold	22	APLAC INCORPORATED	46.1250	1,014.71	
10-21	Sold	26	ALCATEL ADS	27	701.97	
09-10	Sold	5	AMAZON COM INC	63.5122	317.54	
08-10	Sold	19	AMERICA ONLINE INC	80 2/16	1,522.32	
01-04	Sold		AMERICAN INTERNATIONAL GP		81.37	CASH IN LIEU OF FRACTIONS
10-04	Sold	15	AMERICAN INTERNATIONAL GP	86	1,289.95	
10-12	Tender	25	AMERITECH CORP			EXCHANGE
12-03	Sold	5	AMGEN INC	46.5625	232.80	
05-25	Sold		ANGLO AMERICAN PLC ADR		41.14	CASH IN LIEU OF FRACTIONS
05-25	Tender	8	ANGLO AMERICAN CP SO AFRI ADR			EXCHANGE
09-13	Sold	7	ANGLO AMERICAN PLC ADR	55.6067	389.23	
03-11	Sold	46	APPLE COMPUTER INC	33.8664	1,557.79	
06-02	Sold	11	ARACRUZ CELULOSE SA AMER MEM	19.6339	215.96	
06-19	Sold	6	ARM HOLDINGS PLC ADS	139.3177	835.86	
05-07	Sold	8	ARM HOLDINGS PLC ADS	33.7222	269.77	
12-10	Sold	5	ARM HOLDINGS PLC ADS	165.8484	829.27	
06-28	Tender	19	ASCEND COMMUNICATIONS INC			EXCHANGE
12-22	Sold	12	ASM LITHOGRAPHY HLDG NV ORD	98	1,175.96	
01-19	Sold	14	AT HOME CORPORATION	99.2701	1,388.26	
05-03	Sold	6	AT HOME CORPORATION	146.1995	877.17	
07-21	Sold	29	AT HOME CORPORATION	48.4102	948.16	
05-12	Sold	34	ATI TECHNOLOGY	14 1/16	478.11	
07-19	Sold	19	ATI TECHNOLOGY	15.5750	292.12	
03-05	Sold	11	AUTOLIV INC	38.3014	421.30	
04-29	Sold	14	AUTOLIV INC	34.3889	482.98	
04-26	Sold	16	AXA-UAP	63	1,087.96	
05-25	Sold	17	BANCO COMER PORTUGUES ADS	27.3750	465.36	
02-02	Sold	22	BANCO DE GAL Y BUENOS AIRE ADR	11.8750	261.24	
07-19	Sold	62	BANCO SANTANDER CENT HISPANO	9.9243	615.28	
04-08	Sold	6	BANK OF IRELAND GRP	84	503.98	
09-30	Sold	35	BANK OF TOKYO-MITSUBISHI LTD	15 1/8	529.34	
03-10	Sold	2	BANYU PHARMACEUTICALS ADR	312	623.97	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
08-16	Sold	4	BARCLAYS PLC ADR	117.9729	471.87	
12-13	Sold	4	BARCLAYS PLC ADR	106	423.96	
11-15	Sold	21	BARRICK GOLD CORP	17.6138	369.87	
11-24	Sold	15	BASF AG NEW ADR	45.0694	676.01	
01-20	Sold	7	BAYRSCHE HYP UND VER AG SP ADR	73.3993	513.78	
12-23	Sold	38	BED BATH & BEYOND INC	31.2978	1,189.28	
01-14	Sold	11	BENCKISER NV CLASS B	70.0369	770.35	
09-07	Sold	149	BLUE CIRCLE INDUSTRIES ADR	7.0625	1,052.27	
03-11	Sold	41	BLYTH INDUSTRIES INC	25.9041	1,062.03	
01-06	Sold	25	BMC SOFTWARE	42.4024	1,060.02	
05-21	Sold	4	BP AMOCO PLC ADS	105.5124	422.05	
09-07	Sold	2	BP AMOCO PLC ADS	112.7500	225.49	
01-08	Sold	5	BRIDGESTONE CP ADR	206	1,029.96	
08-26	Sold	4	BRIDGESTONE CP ADR	280	1,119.96	
03-04	Sold	16	BRITISH AEROSPACE SPN ADR	25.5000	407.98	
07-28	Sold	27	BRITISH AMER TOB SPON ADR	16 3/4	452.23	
04-05	Sold	2	BRITISH TELECOMMUNIC PLC ADR	162.3125	324.61	
11-08	Sold	34	BROKEN HILL PROP LTD ADR SPNSR	20.4639	695.74	
12-23	Sold	27	BURLINGTON RESOURCES INC	31.6075	855.53	
04-27	Sold	13	CABLE & WIRELESS COMMS PLC	55	714.97	
06-11	Sold	12	CANAL PLUS ADR	60.7500	728.97	
09-23	Sold	18	CANON INC ADR NEW	28.5000	512.98	
08-18	Sold	30	CAPITAL ONE FINANCIAL CORP	47.1295	1,413.84	
12-20	Sold	14	CELESTICA INC SUB VTG SHS	79.2116	1,108.92	
01-27	Sold	5	CELLULAR COMM INTL	80.0625	400.29	
03-19	Sold	10	CELLULAR COMM INTL	79.6892	796.66	
06-02	Sold	16	CEMEX/TOLMEX S.A D.E SP ADR	9.0157	144.24	
08-05	Sold	44	CEMEX/TOLMEX S.A D.E SP ADR	8.3750	368.48	
05-14	Sold	26	CERIDIAN CORPORATION	35 15/16	934.34	
04-22	Sold	11	CHINA TELECOM LTD AMERN DEP SH	39.7500	437.23	
10-04	Sold	18	CIGNA CP	87	1,565.94	
12-03	Sold	8	CISCO SYS INC	91.4375	731.47	
08-12	Sold	60	CITY DEV LTD SPON ADR	6.3750	433.48	
04-29	Sold	21	COCA COLA FEMSA S A ADR	20.6250	433.11	
09-08	Sold	9	COFLEXIP SPONSORED ADR	45.0269	405.22	
11-09	Sold	17	COFLEXIP SPONSORED ADR	36	611.97	
02-24	Sold	5	COLT TELECOM GROUP PLC ADR	73.8100	379.03	
03-03	Sold	35	COMPAQ COMPUTER CORP	35.3125	1,235.89	
10-08	Sold	25	COMPUTER SCIENCES CP	63.4348	1,585.81	
02-23	Sold	24	COMPUWARE CORP	56.5806	1,357.88	
01-07	Sold	16	CONTINENTAL ALNS INC CL B	34	543.98	
03-10	Sold	14	CORP BANCARIA ESPANA AM DEP SH	46 10/16	652.72	
11-09	Sold	34	CORUS GROUP PLC ADS	18.8125	639.60	
10-20	Sold	40	CRH PLC ADR	19.6250	784.97	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 842 109600 FA 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
09-10	Sold	10	D S M NV SPONS ADR	29.6715	296.71	
11-24	Sold	69	D S M NV SPONS ADR	9.3833	641.90	
04-19	Sold	4	DAIMLER-CHRYSLER AG ADR	96.4641	386.60	
07-23	Sold	4	DAIMLER-CHRYSLER AG ADR	87.1250	322.73	
12-14	Sold	6	DAIWA HOUSE IND LTD ADR	84.2600	505.54	
03-31	Sold	117	DARDEN RESTAURANTS	20.4197	2,389.02	
02-18	Sold	30	DASSAULT SYSTEMS SA ADS	49.9218	1,227.40	
12-14	Sold	33	DAYTON HUDSON CORP	67.4375	2,225.36	
05-05	Sold	22	DEUTSCHE LUFTHANSA AG ADR	22.8750	503.23	
01-27	Sold	12	DIXONS GRP PLC ADR	48	575.98	
05-05	Sold	9	DIXONS GRP PLC ADR	43.5000	371.48	
07-16	Sold	8	DIXONS GRP PLC ADR	61.5000	491.98	
07-02	Sold	11	EAST TELECOM GROUP PLC ADS	43.1250	474.36	
03-18	Sold	8	ELAN PLC ADR	82.0215	656.16	
05-27	Sold	20	ENTERPR OIL PLC SPON ADR ORD	18.3029	366.04	
04-19	Sold	4	EQUANT N.V.	94.3215	377.27	
08-24	Sold	9	EQUANT N.V.	79.2500	713.22	
06-11	Sold	11	FOMENTO ECONOMICO MEXICANO	33	384.98	
06-21	Sold	10	FOMENTO ECONOMICO MEXICANO	36.1250	361.23	
10-05	Sold	46	FOREST LABORATORIES	42	1,931.93	
07-02	Sold	41	FRONTIER CORP	57.9570	2,376.16	
01-21	Sold	20	FUJI PHOTO ADR NEW	36.7500	696.97	
05-20	Sold	20	FUJI PHOTO ADR NEW	34.5074	690.12	
03-04	Sold	11	FUJITSU LTD ADR NEW	60	659.97	
06-18	Sold	8	FUJITSU LTD ADR NEW	144	1,151.96	
10-20	Sold	5	FUJITSU LTD ADR NEW	139.7516	698.73	
01-14	Sold	7	GALLAHER GP PLC ADR	26.3125	184.18	
02-25	Sold	21	GALLAHER GP PLC ADR	27	566.98	
09-10	Sold	2	GEMENTECH INC	176.1256	360.23	
05-07	Sold	9	GILAT SATELLITE NTWK LTD ORD	52.0539	468.47	
06-19	Sold	25	GKN PLB LTD CO ADR	16.6250	415.61	
03-19	Sold	4	GLOBAL CROSSING LTD	58.6788	233.91	
06-02	Sold	8	GLOBAL CROSSING LTD	46.3125	370.48	
10-05	Sold	14	GLOBAL TELESYSTEM GP INC	28.6676	280.94	
02-01	Sold	9	GROUPE DANONE SPONSORED ADR	53.0859	477.02	
12-21	Sold	10	GROUPE DANONE SPONSORED ADR	64.7887	647.87	
04-07	Sold	49	GRT UNV STR ORD ADR	10.5184	515.38	
08-16	Sold	13	GRUPO TELEVISA S.A.GLOBAL DEP	38.2596	497.23	
06-18	Sold	8	HANSON PLC SPON ADR NEW	44.9511	359.59	
03-11	Sold	18	HEALTH MGMT ASSOC CL A	13 2/16	236.24	
10-26	Sold	13	HITACHI 10 COM NEW ADR	98	1,273.95	
08-10	Sold	4	HONDA MOTOR COMPANY LTD ADR	82.1319	328.59	
08-13	Sold	9	HONDA MOTOR COMPANY LTD ADR	83	746.97	
08-20	Sold	12	HSBC HOLDINGS PLC SPON ADR NEW	60.5090	726.08	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-04	Sold	26	HUANENG PWR INTL SPN ADR H SHS	9 6/16	240.49	
07-26	Sold	17	HUTCHISON WHAMPOA ADR	46.8000	790.47	
07-21	Sold	24	IMS HEALTH INC	30.6315	732.73	
12-03	Sold	11	INFINITY BROADCASTING CP A NEW	37.5749	413.30	
07-16	Sold	14	ING GROEP NV ADR	52.9597	741.41	
05-20	Sold	19	INSTITUTO NATIONALE DELLE ADS	22.6875	431.04	
07-28	Sold	36	ISPAT INTL N.V.	11 6/16	489.48	
06-17	Sold	14	IXOS SOFTWARE AKTIENGESELLSHAF	38.2765	535.85	
08-09	Sold	10	IXOS SOFTWARE AKTIENGESELLSHAF	30.0669	300.66	
12-14	Sold	21	JOHNSON & JOHNSON	92.5000	1,942.43	
06-29	Sold	16	K L M ROYAL DUTCH AIRLINES	27.2500	435.98	
10-20	Sold	5	KAO CORP ADR	256.0335	1,280.12	
01-20	Sold	11	KINGFISHER PLC SPN ADR	21.0510	231.56	
06-23	Sold	19	KINGFISHER PLC SPN ADR	23.3316	443.28	
07-19	Sold	39	KOMATSU LTD SPON ADR NEW	25.6250	999.34	
04-19	Sold	19	KONINKLIJKE AHOLD NV ADS	41 1/2	788.67	
08-21	Sold	9	KONINKLIJKE AHOLD NV ADS	35 6/16	318.36	
07-15	Sold	10	KONINKLIJKE AHOLD NV ADS	35.5625	355.61	
03-05	Sold	46	KOREA ELECTRIC POWER CORP ADS	14.1338	649.72	
06-23	Sold	13	KOREA TELECOM	33.0399	429.50	
05-13	Sold	20	KROGER CO	51.0219	1,020.40	
03-31	Sold	23	LEXMARK INTL GROUP INC A	99.8320	2,296.06	
06-28	Sold		LUCENT TECHNOLOGIES		22.93	CASH IN LIEU OF FRACTIONS
03-11	Sold	8	MAGYAR TAVKOZLESIRT	26 12/16	213.99	
03-09	Sold	7	MANNESMANN AG SP ADR	123	860.97	
07-22	Sold	7	MANNESMANN AG SP ADR	163	1,140.96	
05-05	Sold	19	MARUBENI LTD ADR NEW	32.7588	622.22	
07-21	Sold	26	MEDIAONE GROUP INC	74.3726	1,933.62	
04-09	Sold	27	METTLER TOLEDO INTL	23.5936	637.00	
06-16	Sold	22	METTLER TOLEDO INTL	26.5000	582.98	
09-10	Sold	2	MOODORM TIDHES GP HTG AB ADR	150	299.99	
03-23	Sold	14	NATL GRID GROUP PLC ADR	35.0985	491.25	
05-11	Sold	17	NETCOM SYS AB SPONS ADR	30.1300	512.19	
05-25	Sold	23	NETWORKS ASSOCIATES INC	41.0397	943.87	
08-19	Sold	108	NEW WORLD DEV CO LTD SPON ADR	8.1250	853.68	
02-10	Sold	10	NEWBRIDGE NETWORKS	29.2500	292.49	
10-04	Sold	43	NINTENDO CO LTD ADR NEW	19.1250	822.35	
02-08	Sold	9	NOKIA CP ADR	136 8/16	1,228.45	
02-10	Sold	4	NOVARTIS AG ADR	92.7500	370.98	
03-23	Sold	4	NOVARTIS AG ADR	84.5000	337.98	
12-14	Sold	14	OJI PPR LTD ADR	62	867.97	
10-04	Sold	50	OLYMPUS OPTICAL SPON ADR	13.1250	656.22	
05-13	Sold	40	ORACLE CORP	23.6750	954.96	
12-03	Sold	24	ORACLE CORP	70.5876	1,689.24	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
10-28	Sold	8	ORANGE PLC ADR	116.8114	934.45	
02-16	Sold	17	ORIX CORP	31.2022	530.42	
08-21	Sold	26	PEARSON PLC SP ADR	19.3750	503.73	
11-04	Sold	32	PECHINEY	29	927.96	
08-18	Sold	17	PENINSULAR & OR STM NAV ADR	30.6250	520.61	
07-22	Sold	43	PERUSAHAAN PERSERORAN INDONESIA	11.7500	505.23	
08-11	Sold	3	PERUSAHAAN PERSERORAN INDONESIA	9.2500	27.74	
12-16	Sold	24	POHANG IRON & STEEL CO. LTD	35.5310	852.71	
10-07	Sold	23	PRIMACOM AG SPON ADR	27.2500	626.72	
08-05	Sold	10	QWEST COMMUNICATIONS INTL INC	86.4621	864.59	
04-23	Sold	36	QWEST COMMUNICATIONS INTL INC	37.5017	1,352.89	
09-28	Sold	14	RESEARCH IN MOTION	29.6250	414.73	
12-21	Sold	18	RESEARCH IN MOTION	42.5114	765.18	
07-01	Sold	4	ROCHE HOLDINGS ADR	104.9846	419.92	
06-22	Sold	17	ROGERS COMM INC CL B (BC)	18 5/16	311.29	
10-27	Sold	24	SAP AKTIENGESELLSCHAFT ADS	34 5/8	830.97	
10-12	Sold		SBC COMMUNICATIONS		45.23	CASH IN LIEU OF FRACTIONS
09-07	Sold	10	SCHLUMBERGER LTD	65.8125	658.10	
06-29	Sold	9	SCM MICROSYSTEMS	45.9426	413.46	
07-21	Sold	38	SEAGATE TECHNOLOGY	26.6509	1,012.69	
01-13	Sold	7	SEKISUI HOUSE LTD ADR	100	699.97	
03-11	Sold	20	SERVICE CORP INTL	15 2/16	302.49	
12-23	Sold	43	SGL CARBON ADR	22.0652	948.76	
01-13	Sold	13	SHIRE PHARM GROUP PLC ADS	20.3750	264.87	
04-23	Sold	24	SHIRE PHARM GROUP PLC ADS	19.1250	458.98	
04-19	Sold	4	SMITHKLINE PLC ADS $	71.2532	285.00	
07-26	Sold	8	SMITHKLINE PLC ADS $	60.2530	482.00	
04-19	Sold	14	SOCIETE GENERALE SP ADR	35	489.98	
07-20	Sold	18	SOCIETE GENERALE SP ADR	34.5000	620.97	
12-22	Sold	6	SONERA CORP ADS	50.1623	300.96	
05-06	Sold	11	SONY CORP ADR 1974 NEW	92.2500	1,014.71	
09-27	Sold	20	SUN MICROSYSTEMS INC	91.2618	1,825.17	
12-03	Sold	6	SUN MICROSYSTEMS INC	137.6618	837.82	
01-04	Tender	15	SUNAMERICA INC			TRADE CARRIES STOCK DISTRIB. EXCHANGE
09-16	Sold	21	SVENSKA CELLULOSA B SP ADR	28.7500	603.72	
07-15	Sold	18	SWISSCOM AG	34.0200	612.33	
09-27	Sold	28	TAIWAN SMCONDCTR MFG CO LTD ADR	30	839.97	
08-30	Sold	13	TALISMAN ENERGY INC	30.0695	390.88	
12-20	Sold	22	TALISMAN ENERGY INC	23.7500	522.46	
02-03	Sold	10	TDK CP ADR NEW	82 4/16	822.67	
03-04	Sold	2	TELE DENMARK A/S ADS	59.0085	118.01	
03-17	Sold	9	TELE DENMARK A/S ADS	52.1214	469.07	
04-26	Sold	8	TELE DENMARK A/S ADS	51.1875	409.26	
06-22	Sold	37	TELE NORTH LESTE PART $A ADR	19.1250	707.60	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 842 108600 FA 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
04-22	Sold	9	TELECOM CP NZ LTD ADS	39.8750	358.86	
09-10	Sold	12	TELECOM EIREANN ADS	17.5000	209.99	
09-27	Sold	32	TELECOM EIREANN ADS	16.5697	530.21	
06-01	Sold	4	TELECOM ITALIA S.P.A	104.3679	626.18	
07-01	Sold	7	TELEFONICA DE ESPANA SA ADR	144.0625	1,008.40	
01-27	Sold	11	TELEFONOS DE MX SA DE CV ADR	49.6020	545.60	
08-05	Sold	7	TELEFONOS DE MX SA DE CV ADR	74.1250	518.86	
08-13	Sold	9	TELEWEST COMMUNICATIONS PLC ADR	34.3750	309.36	
04-27	Sold	5	TELSTRA CP LTD GDR	105	524.98	
08-16	Sold	16	TLC LASER CENTER INC	30 3/8	485.98	
08-26	Sold	22	TOWER SYS A/S ADR NEW	32.8750	723.22	
09-21	Sold	7	TOTAL FINA SA ADS	65	454.98	
01-07	Sold	26	TRANSACTION SYS ARCH INC A	48.0833	1,250.12	
12-14	Sold	46	TYCO INTERNATIONAL LTD NEW	26.9049	1,237.58	
12-08	Sold	14	UNILEVER PLC (NEW) ADS	29.7842	416.99	
08-24	Sold	8	UTD PAN-EUROPE COMM NV SP ADS	58.0959	464.03	
03-04	Sold	4	VALEO SPONSORED ADR	84.5000	337.98	
05-13	Sold	6	VALEO SPONSORED ADR	89.1934	535.14	
12-10	Sold	14	VEBA AKTIENGELLSCHAFT	47	657.97	
07-22	Sold	54	VIVENDI SPONSORED ADR	15.6250	843.72	
04-16	Sold	19	VNU NV SP ADR	35.8750	681.60	
08-20	Sold	3	VODAFONE AIR TOUCH PUB LTD	191.9375	575.79	
09-15	Sold	1	VODAFONE AIR TOUCH PUB LTD	194.1250	194.12	
10-25	Sold	10	VODAFONE AIR TOUCH PUB LTD	42.4023	424.00	
03-09	Sold	36	VOLKSWAGEN AG SPON ADR	12.1250	436.48	
05-03	Sold	39	VOLKSWAGEN AG SPON ADR	14.2000	553.78	
06-23	Sold	41	WASHINGTON MUTUAL INC	34.1250	1,401.88	
03-05	Sold	27	WATSON PHARMACEUTICAL INC	49.0625	1,324.66	
12-14	Sold	22	WELLPOINT HLTH NET INC NEW	59.1250	1,300.70	
12-27	Sold	46	WILLIAMS CO INC	28.8750	1,154.96	
03-16	Sold	3	WOLTERS KLUWER NV SPON ADR	190	549.98	
05-21	Sold	8	WOLTERS KLUWER NV SPON ADR	40.2500	321.98	
05-27	Sold	8	YAHOO INC	142.3274	1,138.58	
			Total Sales Proceeds/Redemptions		[illegible]	

Other Credits

Date	Activity	Description	Amount	Additional Information
03-05	Stock Dividend	TELEFONICA DE ESPANA SA ADR	19.22	CASH IN LIEU FRACTIONAL SHARE
06-23	Journal Out	ANGLO AMERICAN CP SO AFRI ADR	0.40	CANCELLATION FEE ON ADRS
06-24	Stock Dividend	TELEFONICA DE ESPANA SA ADR	21.07	CASH IN LIEU FRACTIONAL SHARE
08-06	Stock Dividend	PERUSAHAAN PERSERORAN INDONESIA	3.96	CASH IN LIEU FRACTIONAL SHARE
		Total Other Credits	44.65	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Total Credits To Your Account $145,534.29

DEBITS TO YOUR ACCOUNT

Withdrawal

Date	Activity	Description	Amount	Additional Information
03-05	Transfer	FUNDS TRANSFERRED	8,000.00	PER LETTER OF AUTHORIZATION TO 642-122048-0
11-09	Transfer	FUNDS TRANSFERRED	5,000.00	PER LETTER OF AUTHORIZATION TO 642-115916-0
		Total Withdrawals	13,000.00	

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
05-13	Bought	36	ABITIBI CONSOLIDATED INC	11 11/16	420.75	
07-29	Bought	48	ABITIBI CONSOLIDATED INC	12.2500	588.00	
04-22	Bought	4	AFLAC INCORPORATED	51.4435	205.77	
07-23	Bought	24	ALCATEL ADS	27.5258	715.47	
07-21	Bought	16	AMAZON COM INC	137.6809	2,202.89	
06-16	Bought	10	AMERICA ONLINE INC	100.5000	1,005.00	
07-21	Bought	9	AMERICA ONLINE INC	121.9115	1,097.20	
01-04	Received	12	AMERICAN INTERNATIONAL GP			EXCHANGE
01-25	Bought	25	AMERITECH CORP	67.9375	1,698.44	
07-21	Bought	7	AMGEN INC	77.8897	545.23	
04-23	Bought	8	ANGLO AMERICAN CP SO AFRI ADR	49.2500	394.00	
05-25	Received	7	ANGLO AMERICAN PLC ADR			EXCHANGE
03-25	Bought	38	ARACRUZ CELULOSE SA AMER NEW	13.9631	418.89	
04-19	Bought	2	ARACRUZ CELULOSE SA AMER NEW	17 3/4	35.50	
04-15	Bought	20	AT&T CORPORATION	86.6652	1,733.66	TRADE CARRIES STOCK DISTRIB.
04-08	Bought	23	AT&T LIBERTY MEDIA GROUP A	69.2122	1,591.88	TRADE CARRIES STOCK DISTRIB.
08-24	Bought	12	AXA ADS	61.5570	738.68	
01-22	Bought	4	AXA-UAP	74.7500	299.00	
02-09	Bought	4	AXA-UAP	70	280.00	
03-15	Bought	8	AXA-UAP	66.3434	530.75	
01-26	Bought	17	BANCO COMER PORTUGUES ADS	32	544.00	
03-15	Bought	31	BANCO DE SANTANDER ADR	21.0184	651.57	
01-12	Bought	3	BANK OF IRELAND GRP	93.7500	281.25	
02-08	Bought	3	BANK OF IRELAND GRP	95.6095	286.83	
03-23	Bought	6	BANK OF TOKYO-MITSUBISHI LTD	13 15/16	83.63	
08-25	Bought	13	BANK OF TOKYO-MITSUBISHI LTD	16.9375	220.19	
02-18	Bought	2	BARCLAYS PLC ADR	105.5800	211.16	

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ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-02	Bought	6	BARCLAYS PLC ADR	110.9672	665.80	
10-22	Bought	21	BARRICK GOLD CORP	19.7943	415.68	
08-10	Bought	15	BASF AG NEW ADR	47.5646	713.50	
12-22	Bought	194	BILLITON PLC ADR	6.5000	1,261.00	
09-29	Bought	11	BIOVAIL CORP INTERNATIONAL	50	550.00	
08-11	Bought	149	BLUE CIRCLE INDUSTRIES ADR	7.4663	1,112.48	
03-16	Bought	3	BP AMOCO PLC ADS	98	294.00	
03-24	Bought	3	BP AMOCO PLC ADS	96.9811	290.94	
04-22	Bought	3	BRIDGESTONE CP ADR	265	795.00	
06-15	Bought	1	BRIDGESTONE CP ADR	294	294.00	
06-02	Bought	27	BRITISH AMER TOB SPON ADR	19.2500	519.75	
08-13	Bought	34	BRITISH STEEL PLC ADR FNL INST	28.0926	955.15	
03-03	Bought	2	BRITISH TELECOMMUNIC PLC ADR	175.6468	351.73	
04-23	Bought	19	BROKEN HILL PROP LTD ADR SPNSR	21.2493	403.74	
07-14	Bought	15	BROKEN HILL PROP LTD ADR SPNSR	25	375.00	
01-28	Bought	12	CANAL PLUS ADR	55.7500	669.00	
07-12	Bought	38	CANON INC ADR NEW	29.2500	1,111.50	
08-27	Bought	60	CATHAY PCFC ARNYS LTD NW $ ADR	9.0726	544.36	
10-05	Bought	35	CATHAY PCFC ARNYS LTD NW $ ADR	9.3504	327.27	
10-05	Bought	41	CBS CORPORATION	46.5625	1,909.06	
01-25	Bought	10	CELESTICA INC SUB VTG SHS	33.4375	334.38	
03-25	Bought	4	CELESTICA INC SUB VTG SHS	43.6119	174.45	
03-26	Bought	40	CEMEX/TOLMEX S.A D.E SP ADR	7.1250	427.50	
03-22	Bought	18	CIGNA CP	79.8125	1,436.63	
07-21	Bought	3	CISCO SYS INC	64.2500	190.75	
03-12	Bought	68	CITY DEV LTD SPON ADR	6.9325	471.41	
04-23	Bought	21	COCA COLA FEMSA S A ADR	19	399.00	
05-12	Bought	8	COFLEXIP SPONSORED ADR	43.0649	344.52	
08-13	Bought	13	COFLEXIP SPONSORED ADR	46.7619	607.64	
10-05	Bought	5	COFLEXIP SPONSORED ADR	47.6838	238.42	
07-21	Bought	12	COMCAST SPL A	39.6875	476.25	
05-28	Bought	7	COMPUTER SCIENCES CP	64.0370	448.26	
09-07	Bought	22	COOKSON GROUP PLC SP ADR	18.5000	407.00	
12-14	Bought	21	CORNING INC	113.4859	2,383.20	
01-12	Bought	2	CORP BANCARIA ESPANA AM DEP SH	54.4264	108.85	
12-21	Bought	45	CORUS GROUP PLC ADS	25.7692	1,159.21	
03-10	Bought	16	CRH PLC ADR	18.6250	298.00	
03-24	Bought	12	CRH PLC ADR	18.6250	223.50	
04-23	Bought	12	CRH PLC ADR	20.2500	243.00	
08-11	Bought	33	D S M NV SPONS ADR	34.5000	1,138.50	
09-30	Bought	4	DAI ICHI KANGYO BK LTD	117.9324	471.73	
10-22	Bought	6	DAIWA HOUSE IND LTD ADR	95	570.00	
03-11	Bought	22	DAYTON HUDSON CORP	68.2500	1,501.50	
07-21	Bought	11	DAYTON HUDSON CORP	69.8750	768.63	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number 642 108600 FA 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
09-30	Bought	20	DE BEER CONS MINES ADR DEFD	28.2500	$45.00	
10-05	Bought	12	DE BEER CONS MINES ADR DEFD	27.4375	329.25	
04-29	Bought	22	DEUTSCHE LUFTHANSA AG ADR	23.8750	525.25	
08-23	Bought	12	DEUTSCHE BANK AG SP ADR	47.1250	865.50	
12-15	Bought	17	DEUTSCHE TELEKOM AG 1 ORD 1ADS	59.5000	1,011.50	
02-04	Bought	5	DIXONS GRP PLC ADR	52.5000	262.50	
04-07	Bought	14	EIDOS PLC ADR	34.9972	489.96	
12-28	Bought	20	EMC CORP MASS	98.7500	1,975.00	
10-29	Bought	7	ENI SPA AMER DEP RCPT	58.2144	407.50	
09-17	Bought	20	ENTERPR OIL PLC SPON ADR ORD	20.7500	415.00	
12-13	Bought	13	EPCOS A G	83 7/16	1,084.69	
02-08	Bought	13	EQUANT N.V.	82 8/16	1,072.50	
11-02	Bought	6	EQUANT N.V.	92.9623	557.77	
12-14	Bought	5	EQUANT N.V.	96.9335	482.17	
07-13	Bought	18	ERICSSON LM TEL ADR B SEK 10	29.5406	531.73	
06-30	Bought	12	FOMENTO ECONOMICO MEXICANO	35 8/16	426.00	
05-10	Bought	9	FOMENTO ECONOMICO MEXICANO	35.7500	321.75	
05-27	Bought	7	FOREST LABORATORIES	50	350.00	
07-21	Bought	14	FOREST LABORATORIES	49.7500	696.50	
09-13	Bought	16	FORTIS AMEV NV SPS ADR	34.1845	546.98	
06-17	Bought	7	FRESENIUS MEDICAL CARE AG	17.7180	125.97	
03-11	Bought	41	FRONTIER CORP	36.3797	1,491.57	
04-22	Bought	20	FUJI PHOTO ADR NEW	38.6250	772.50	
04-22	Bought	6	FUJITSU LTD ADR NEW	81.7500	490.50	
10-05	Bought	3	GENENTECH INC	150.3917	451.18	
12-29	Bought	21	GENERAL MOTORS CORP H (NEW)	88.2641	1,853.55	
08-05	Bought	11	GENETECH INC	148	1,628.00	
02-25	Bought	36	GKN PLB LTD CO ADR	14.1250	534.75	
03-03	Bought	22	GKN PLB LTD CO ADR	13.7500	302.50	
01-26	Bought	36	GRT UNV STR ORD ADR	12.6250	454.50	
02-05	Bought	13	GRT UNV STR ORD ADR	13	169.00	
05-06	Bought	13	GRUPO TELEVISA S.A.GLOBAL DEP	41.3457	537.75	
03-12	Bought	8	HANSON PLC SPON ADR NEW	49.4973	395.98	
07-20	Bought	13	HITACHI 10 COM NEW ADR	108.8776	1,415.41	
10-01	Bought	25	HOME DEPOT INC	46 4/16	1,634.25	
03-05	Bought	7	HONDA MOTOR COMPANY LTD ADR	74 14/16	524.13	
04-07	Bought	6	HONDA MOTOR COMPANY LTD ADR	92.2242	553.36	
04-26	Bought	3	HSBC HLDG PLC SPND ADR NEW	362	1,086.00	
01-22	Bought	24	IMS HEALTH INC	36 8/16	876.00	
10-05	Bought	31	INDEPNDT ENRGY HLDGS PLC ADS	19.2254	595.99	
03-11	Bought	62	INFINITY BROADCASTING CP A NEW	24	1,488.00	
07-21	Bought	17	INFINITY BROADCASTING CP A NEW	29.4375	500.44	
05-04	Bought	14	ING GROEP NV ADR	61.7773	864.88	
03-15	Bought	19	INSTITUTO NATIONALE DELLE ADS	27.3469	519.59	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108600 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
10-18	Bought	18	INTEL CORP	71.6564	1,289.82	
08-25	Bought	17	INTERNET INITIATIVE JAPAN INC	47.9863	815.80	
12-27	Bought	100	INVENSYS PLC SPONS ADR	10.6130	1,061.30	
06-29	Bought	36	ISPAT INTL N.V.	11.8719	427.39	
10-21	Bought	9	JAPAN TELECOM LTD ADR	52.9978	476.98	
08-20	Bought	17	JOHNSON & JOHNSON	97 10/16	1,659.63	
10-05	Bought	4	JOHNSON & JOHNSON	92.4375	369.75	
05-13	Bought	16	K L M ROYAL DUTCH AIRLINES	32.7583	524.13	
06-21	Bought	5	KINGFISHER PLC SPN ADR	27.7500	138.75	
05-07	Bought	22	KONATSU LTD SPON ADR NEW	24.2500	533.50	
06-17	Bought	17	KONATSU LTD SPON ADR NEW	26 1/4	446.25	
07-21	Bought	8	KONIN PHILIPS ELEC NV NEW	110.1250	881.00	
06-02	Bought	13	KOREA TELECOM	30.4823	396.27	
12-02	Bought	6	KUBOTA CP ADR	78	468.00	
09-09	Bought	9	KYOCERA CP ADR	69 1/4	627.75	
06-28	Received	31	LUCENT TECHNOLOGIES			EXCHANGE
02-01	Bought	8	MAGYAR TAVKOZLESIRT	31	248.00	
06-02	Bought	14	MAGYAR TAVKOZLESIRT	28.2500	395.50	
03-22	Bought	3	MANNESMANN AG SP ADR	133	399.00	
06-02	Bought	1	MANNESMANN AG SP ADR	139.5000	139.50	
10-27	Bought	5	MANNESMANN AG SP ADR	151.5414	757.81	
10-21	Bought	21	MARUBENI CORP ADR	30	630.00	
06-08	Bought	18	MCI WORLDCOM INC	84.1959	1,549.91	
07-21	Bought	8	MCI WORLDCOM INC	90.3125	722.50	
03-11	Bought	26	MEDIAONE GROUP INC	57 6/16	1,491.75	
12-23	Bought	22	MICROSOFT CORP	112.7364	2,480.20	
02-16	Bought	5	MODERN TIMES GP MTG AB ADR	76	380.00	
03-09	Bought	4	MODERN TIMES GP MTG AB ADR	87.0842	348.36	
04-15	Bought	20	MOTOROLA INC	81.6250	1,632.50	
05-23	Bought	100	NEW WORLD DEV CO LTD SPON ADR	5.2391	564.85	
05-24	Bought	57	NINTENDO CO LTD ADR NEW	14.3750	819.38	
06-23	Bought	14	NINTENDO CO LTD ADR NEW	20	280.00	
07-06	Bought	19	NIPPON TELEGRAPH&TELEPHONE ADS	60.9131	1,157.39	
10-21	Bought	3	NOMURA SEC LTD ADR JAPAN 100CM	156	468.00	
06-16	Bought	6	NORTEL NETWORKS CORP ADR	83	498.00	
07-13	Bought	2	NORTEL NETWORKS CORP ADR	89.4375	178.88	
11-04	Bought	9	NTT MOBILE COMM NETWK ADR NEW	139.4452	1,255.01	
09-16	Bought	9	OJI PPR LTD ADR	77	693.00	
10-05	Bought	5	OJI PPR LTD ADR	71.6831	358.27	
03-11	Bought	40	ORACLE CORP	37.2938	1,491.72	
06-24	Bought	47	ORACLE CORP	34.7730	1,634.33	
07-21	Bought	12	ORACLE CORP	39.3750	472.50	
09-18	Bought	7	ORANGE PLC ADR	88.9582	634.31	
10-05	Bought	1	ORANGE PLC ADR	99.8625	99.86	

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FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
642 108800 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
05-26	Bought	12	ORIX CORP	42.0543	504.68	
10-07	Bought	4	ORIX CORP	60	360.00	
01-22	Bought	26	PEARSON PLC SP ADR	22.2500	578.50	
07-08	Bought	25	PECHINEY	22.7063	567.66	
08-13	Bought	27	PECHINEY	27.7063	748.07	
12-21	Bought	10	PECHINEY	34.7381	347.38	
04-26	Bought	17	PENINSULAR & OR STH MAV ADR	30.6250	520.63	
05-26	Bought	63	PERUSAHAAN PERSERORAN INDONESIA	10.2393	660.29	
05-05	Bought	14	POHANG IRON & STEEL CO. LTD	25.7500	360.50	
07-23	Bought	10	POHANG IRON & STEEL CO. LTD	34.9586	349.59	
03-26	Bought	44	PRIMACOM AG SPON ADR	17.7500	781.00	
02-12	Bought	32	RESEARCH IN MOTION	10.6166	339.72	
11-03	Bought	29	RHODIA SPONSORED ADR	19.2974	559.62	
12-30	Bought	20	RHODIA SPONSORED ADR	22.7500	455.00	
03-10	Bought	17	ROGERS COMM INC CL B (BC)	17.6250	299.63	
10-29	Bought	6	ROYAL PTT NEDERLAND N.V. ADS	50.2201	301.32	
11-04	Bought	5	ROYAL PTT NEDERLAND N.V. ADS	50.7826	253.91	
09-01	Bought	8	SAKURA BANK LTD(JAPAN)ADR	141.6306	1,133.04	
09-15	Bought	18	SAP AKTIENGESELLSCHAFT ADS	38.8650	699.94	
10-07	Bought	6	SAP AKTIENGESELLSCHAFT ADS	38.3750	230.25	
12-21	Bought	13	SAP AKTIENGESELLSCHAFT ADS	50 1/4	653.25	
10-12	Received	32	SBC COMMUNICATIONS			EXCHANGE
05-03	Bought	10	SCHLUMBERGER LTD	62.6875	626.88	
10-29	Bought	11	SCHLUMBERGER LTD	59.5546	655.12	
03-08	Bought	9	SCM MICROSYSTEMS	79.7057	717.35	
07-21	Bought	5	SEVEN ELEVEN JAPAN CO LTD ADR	105	525.00	
07-29	Bought	31	SGL CARBON ADR	27 8/16	832.50	
08-16	Bought	12	SGL CARBON ADR	28	336.00	
09-27	Bought	21	SHIRE PHARM GROUP PLC ADS	26	546.00	
05-24	Bought	8	SHL TRNSATRAD PLC NY SH NEW	42.7500	342.00	
07-16	Bought	12	SHL TRNSATRAD PLC NY SH NEW	50 2/16	601.50	
01-12	Bought	20	SOCIETE GENERALE SP ADR	37.6250	752.50	
03-17	Bought	12	SOCIETE GENERALE SP ADR	35 5/8	426.50	
10-18	Bought	22	SONERA CORP ADS	26.7339	588.15	
04-22	Bought	1	SONY CORP ADR 1974 NEW	98.9375	98.94	
06-30	Bought	5	SONY CORP ADR 1974 NEW	104.5341	522.67	
08-16	Bought	28	SPRINT PCS SERIES 1	55.2986	1,548.36	
04-07	Bought	4	STMICROELECTRONICS NV	112.9576	451.83	
04-27	Bought	21	SVENSKA CELLULOSA B SP ADR	24.9429	523.80	
11-03	Bought	4	TAIYO YUDEN CO LTD UNSP ADR	148	592.00	
04-05	Bought	22	TALISMAN ENERGY INC	22.5000	495.00	
04-26	Bought	1	TALISMAN ENERGY INC	25.4463	25.47	
07-21	Bought	12	TALISMAN ENERGY INC	29.5000	354.00	
07-30	Bought	19	TELE DENMARK A/S ADS	29	551.00	

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #1-NICHOLAS APPLEGATE

Account Number FA
842 108600 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
01-22	Bought	37	TELE NORTH LESTE PART SA ADR	11.9949	443.81	
03-05	Bought	9	TELECOM CP HZ LTD ADS	39 14/16	358.88	
07-20	Bought	44	TELECOM EIREANN ADS	19 7/16	855.25	
01-12	Bought	6	TELECOM ITALIA S.P.A	98.4537	590.72	
12-08	Bought	9	TELEFONICA DE ESPANA SA ADR	69.7806	628.10	
12-23	Bought	7	TELEFONICA DE ESPANA SA ADR	74.8543	518.24	
07-20	Bought	7	TELEFONOS DE MX SA DE CV ADR	81.6434	571.50	
01-12	Bought	9	TELENEST COMMUNICATIONS PLC ADR	33.6258	302.63	
02-11	Bought	5	TELSTRA CP LTD GDR	114	570.00	
10-05	Bought	19	TEXAS INSTRUMENTS	82.7500	1,572.25	
05-19	Bought	12	TLC LASER CENTER INC	45.2672	543.21	
05-26	Bought	4	TLC LASER CENTER INC	48.6375	194.55	
11-09	Bought	23	TNT POST GRP N. V ADR	25	575.00	
07-23	Bought	7	TOTAL FINA SA ADS	66.2508	463.75	
03-24	Bought	2	TOTAL SA SPONSORED ADR	59.8019	119.60	
07-21	Bought	11	TYCO INTERNATIONAL LTD MEM	99.3750	1,093.13	
10-01	Bought	14	UNILEVER PLC (NEW) ADS	39.2070	548.98	
08-19	Bought	29	UPM KYMMENE CORP ADR	38.2616	765.23	
07-29	Bought	8	UTD PAN-EUROPE COMM NV SP ADS	65	520.00	
11-05	Bought	8	UTD PAN-EUROPE COMM NV SP AD A	76.8591	614.87	
06-09	Bought	9	WEBA AKTIENGELLSCHAFT	57.3194	515.87	
10-05	Bought	5	WEBA AKTIENGELLSCHAFT	56.0504	280.25	
12-16	Bought	42	WAL MART STORES INC	68.8750	2,892.75	
01-22	Bought	41	WASHINGTON MUTUAL INC	41.2500	1,691.25	
09-10	Bought	22	WELLPOINT HLTH NET INC MEM	73.6925	1,621.24	
			Total Funds to Purchase Securities		18,672.34	

Other Debits

Date	Activity	Description	Amount	Additional Information
01-20	Charge	ACCESS 1099 FEE KCC	-736.41	
04-20	Charge	ACCESS 2099 FEE KCC	-726.53	
06-30	Journal Out	ANGLO AMERICAN CP SO AFRI ADR	-0.40	CANCELLATION FEE ON ADRS
06-30	Journal Out	ANGLO AMERICAN CP SO AFRI ADR	-0.40	CANCELLATION FEE ON ADRS
07-14	Charge	ACCESS 3099 FEE KCC	-769.14	
10-13	Charge	ACCESS 4099 FEE KCC	-773.52	
		Total Other Debits	-3,004.34	

Total Debits To Your Account -14,443.79

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number FA
642 113487 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
02-26	Tender	141	ASTRA AB CL B ADS			TENDER
04-07	Tender	141	ASTRA AB CL B ADS TENDER			TENDER PAYMENT
04-07	Sold		ASTRAZENECA PLC ADS		4.89	CASH IN LIEU OF FRACTIONS
12-20	Sold		AVENTIS ADS		45.60	CASH IN LIEU OF FRACTIONS
03-08	Sold	20	CADBURY SCHW PLC ADR 10 ORD NW	61.1875	1,223.70	
12-14	Sold	4	CELANESE AG	16.0869	64.34	
03-08	Sold	20	CITIGROUP INC	58	1,159.96	
04-13	Sold	10	CITIGROUP INC	72.2500	722.47	
10-11	Tender	47	ELF AQUITAINE SPON ADR			TENDER
11-01	Tender	47	ELF NEW ZB EXCH /13			TENDER PAYMENT
03-08	Sold	50	ENDESA SA ADS	25.8125	1,290.58	
12-01	Sold		EXXON MOBIL CORP		33.40	CASH IN LIEU OF FRACTIONS
03-08	Sold	170	GEN ELEC PLC ADR	9.1250	1,551.19	
04-16	Sold	10	HEINEKEN NV ADR	48.2500	482.48	
11-19	Tender	45	HOECHST AKTIENGESELLSHAFT			TENDER
12-20	Tender	45	HOECHST ZB EXCHNGD AVENTIS			TENDER PAYMENT
04-26	Sold	10	INTL BUSINESS MACHINES CORP	168.3125	1,683.07	
04-13	Sold	10	JOHNSON & JOHNSON	96.7500	967.46	
11-12	Sold	40	LOCKHEED MARTIN CORP	17.7310	709.21	
03-08	Sold	55	MANNESMANN AG SP ADR	125.5000	6,902.27	
04-16	Sold	15	MERCK & CO	84.4375	1,266.51	
12-01	Tender	20	MOBIL CORP DELAWARE			EXCHANGE
11-10	Sold	72	PHILIP MORRIS CO INC	26.4097	1,901.43	
10-12	Sold		SBC COMMUNICATIONS		11.06	CASH IN LIEU OF FRACTIONS
11-08	Sold	30	SEARS ROEBUCK & CO	28.2189	846.56	
11-23	Sold	15	SONY CORP ADR 1974 NEW	175.7576	2,636.27	
11-01	Sold		TOTAL FINA SA ADS		45.65	CASH IN LIEU OF FRACTIONS
05-13	Sold		UNILEVER PLC (NEW) ADS		13.13	CASH IN LIEU OF FRACTIONS
05-13	Tender	90	UNILEVER PLC AMER SHARES OLD			EXCHANGE
03-08	Sold	75	VIVENDI SPONSORED ADR	50	3,749.87	
			Total Sales Proceeds/Redemptions		$31,656.15	

Other Credits

Date	Activity	Description	Amount	Additional Information
05-03	Distribution	DEUTSCHE BANK AG SP ADR	35.00	
05-28	Stock Dividend	CITIGROUP INC	21.59	CASH IN LIEU FRACTIONAL SHARE
10-25	Stock Dividend	CELANESE AG	8.96	CASH IN LIEU FRACTIONAL SHARE
		Total Other Credits	$65.55	

Total Credits To Your Account $34,352.87

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MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS® ACCESS ACCOUNT
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
ACCESS #2-LAZARD FRERES

Account Number 642 113487 FA 022

DEBITS TO YOUR ACCOUNT

Withdrawal

Date	Activity	Description	Amount	Additional Information
03-08	Transfer	FUNDS TRANSFERRED	19,000.00	PER LETTER OF AUTHORIZATION TO 642-122048-0
		Total Withdrawals	-19,000.00	

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
04-13	Bought	70	ALLIED ZURICH PLC LEVEL I ADR	29.1250	2,038.75	
03-15	Bought	15	AMERITECH CORP	64.4398	966.60	
02-26	Received	141	ASTRA AB CL B ADS TENDER			TENDER
04-07	Received	71	ASTRAZENECA PLC ADS			TENDER DISTRIBUTION FOR ASTRA AB CL B ADS TENDER
12-29	Received	33	AVENTIS ADS			TENDER DISTRIBUTION FOR HOECHST ZB EXCHNGD AVENTIS
10-11	Received	47	ELF NEW ZB EXCH /13			TENDER
12-01	Received	26	EXXON MOBIL CORP			EXCHANGE
11-16	Bought	30	FANNIE MAE	69.9459	2,098.38	
11-19	Received	45	HOECHST ZB EXCHNGD "AVENTIS"			TENDER
11-09	Bought	15	INTL BUSINESS MACHINES CORP	92 10/16	1,389.38	
08-17	Bought	7	KAO CORP ADR	265.7380	1,860.11	
11-16	Bought	20	PROCTER & GAMBLE	105.7719	2,115.44	
10-12	Received	59	SBC COMMUNICATIONS			EXCHANGE
04-16	Bought	30	SMITHKLINE PLC ADS 5	71.9649	2,158.95	
11-01	Received	68	TOTAL FINA SA ADS			TENDER DISTRIBUTION FOR ELF NEW ZB EXCH /13
05-13	Received	80	UNILEVER PLC (NEW) ADS			EXCHANGE
			Total Funds to Purchase Securities		-12,427.41	

Other Debits

Date	Activity	Description	Amount	Additional Information
01-20	Charge	ACCESS 1Q99 FEE LZD	-818.68	
04-20	Charge	ACCESS 2Q99 FEE LZD	-674.19	
07-16	Charge	ACCESS 3Q99 FEE LZD	-716.31	
10-13	Charge	ACCESS 4Q99 FEE LZD	-714.72	
		Total Other Debits	-2,923.90	

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MORGAN STANLEY DEAN WITTER ACTIVE ASSETS® PORTFOLIO ADVANTAGE ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number FA
642 122048 022

Deposits

Date	Activity	Description	Amount	Additional Information
03-08	Transfer	FUNDS TRANSFERRED	19,000.00	FROM 642-108600-0 PER LETTER OF AUTHORIZATION FROM 642-113487-0
		Total Deposits	827,000.00	

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-05	Sold	150	ABR INFORMATION SVCS	18 7/16	2,765.53	
03-05	Sold	75	ACTION PERFORM COS INC	35 7/16	2,657.72	
10-29	Sold	50	ALBERTSONS INC	39.8954	1,994.70	
12-21	Sold	70	AMERICAN HOME PRODUCTS	46 2154	3,234.97	
03-05	Sold	200	ARTESYN TECH INC	14 9/16	2,912.40	
10-05	Sold	30	BAKER HUGHES INC	27 7885	833.63	
06-03	Sold	50	BANK ONE CORP	56 2500	2,812.40	
03-05	Sold	75	BELL & HOWELL COMPANY NEW	33 1/4	2,493.66	
02-24	Sold	75	BORON LEPORE & ASSOCIATES	11.1250	834.35	
03-05	Sold	400	CASH AMER INTERNATIONAL INC	13 1/2	5,399.82	
03-05	Sold	100	CERNER CORP	15 3/8	1,537.44	
11-15	Sold	5	CHUBB CP	58 2500	291.24	
11-22	Sold	15	CITIGROUP INC	56.4639	846.93	
03-05	Sold	300	CLAIRES STORES	23	6,899.77	
03-05	Sold	75	COMMERCIAL FEDERAL CORP	22 1/4	1,668.69	
08-13	Sold		CONOCO INC CL B		13.34	CASH IN LIEU OF FRACTIONS
09-23	Sold	55	DANA CORP	36.9687	2,033.21	
03-05	Sold	150	DEL MONTE FOODS COMPANY	14 7/16	2,165.55	
08-03	Tender	50	DU PONT EI DE NEMOURS & CO			TENDER
08-13	Tender	50	DU PONT EXCHANGE INTO CONOCO			TENDER PAYMENT
04-28	Sold	50	EMERSON ELECTRIC CO	60 0171	3,000.76	
10-07	Sold	15	ENRON CORP	39.7942	596.89	
12-01	Sold		EXXON MOBIL CORP		33.40	CASH IN LIEU OF FRACTIONS
03-05	Sold	125	FORE SYSTEMS INC	14 3/4	1,843.68	
03-05	Sold	100	GARTNER GROUP CL A	21 1/2	2,149.92	
03-05	Sold	500	GENESCO INC	7 5/16	3,654.12	
11-05	Sold	100	GOODRICH B F CO	22.4686	2,246.78	
09-10	Sold	10	HEWLETT PACKARD	109.8921	1,098.88	
06-25	Sold	10	HONEYWELL INC	122.8154	1,228.10	
12-02	Sold		HONEYWELL INTERNATIONAL INC		15.72	CASH IN LIEU OF FRACTIONS
12-02	Tender	30	HONEYWELL INC			EXCHANGE
07-21	Sold	65	HOUSEHOLD INTL INC	47.7697	3,104.92	
03-05	Sold	300	HUGHES SUPPLY INC	19 13/16	5,943.55	

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MORGAN STANLEY DEAN WITTER ACTIVE ASSETS® PORTFOLIO ADVANTAGE ACCOUNT

FOR YEAR ENDING DECEMBER 31, 1999 PAGE 6 OF 9

THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number FA
642 122048 022

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-05	Sold	200	INTERIM SVCS INC	19 1/16	3,812.37	
12-02	Sold	15	KIMBERLY CLARK CORP	65.0148	975.18	
03-05	Sold	146	LEGG MASON INC	28 13/16	4,782.72	
03-05	Sold	100	LNR PROPERTY CORP	18 1/4	1,824.93	
03-05	Sold	150	MAIL WELL INC	14	2,099.93	
03-05	Sold	200	MERISTAR HOSPITALITY	17 15/16	3,587.38	
02-10	Sold	100	MICRO WAREHOUSE INC	33.9375	3,393.63	
12-01	Tender	20	MOBIL CORP DELAWARE			EXCHANGE
03-05	Sold	107	MOVA CORP GEORGIA	25 1/16	2,681.60	
03-05	Sold	100	PERFORMANCE FOOD GROUP COMPANY	26 1/2	2,649.91	
08-26	Sold	90	PGAE CORPORATION	31	2,789.90	
03-05	Sold	500	PHARMERICA INC	6 3/16	3,093.64	
03-05	Sold	100	PROTEIN DESIGN LABS	16 1/4	1,624.96	
11-02	Sold	15	PROVIDIAN FINCL CORP	107	1,604.94	
03-05	Sold	225	PSC INC	8 5/8	1,940.56	
11-16	Sold	175	RITE AID CORP	5.4239	949.14	
12-21	Sold	10	SCHERING PLOUGH CORP	44	439.98	
01-22	Sold	100	STKES ENTERPRISES INC	28.0625	2,806.15	
09-08	Sold	85	USX MARATHON GP	30.8125	2,618.97	
12-10	Sold	40	WARNER LAMBERT CO	85.5125	3,412.36	
03-05	Sold	100	WORLD COLOR PRESS INC	24 1/2	2,449.91	
10-22	Sold	50	XEROX CORP	24.1250	1,206.29	
			Total Sales Proceeds/Redemptions		117,058.63	

Other Credits

Date	Activity	Description	Amount	Additional Information
03-04	Adjustment	VISION 1099 FEE	345.45	
04-15	Stock Dividend	AT&T CORPORATION	27.90	CASH IN LIEU FRACTIONAL SHARE
05-28	Stock Dividend	CITIGROUP INC	21.59	CASH IN LIEU FRACTIONAL SHARE
		Total Other Credits	414.94	

Total Credits To Your Account 0146,191.44

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THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number FA
642 122048 022

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-15	Bought	50	ALBERTSONS INC	55.9375	2,796.88	
03-15	Bought	45	AMERICAN HOME PRODUCTS	61.8750	2,784.38	
06-01	Bought	10	AMERICAN HOME PRODUCTS	57.0625	570.63	
07-26	Bought	15	AMERICAN HOME PRODUCTS	52.1250	781.88	
03-15	Bought	35	ANHEUSER BUSCH COS INC	77.6250	2,716.88	
03-15	Bought	35	AT&T CORPORATION	83.9375	2,937.81	
09-24	Bought	20	AT&T CORPORATION	45.3750	907.50	
03-15	Bought	30	ATLANTIC RICHFIELD CO DE	61.2500	1,837.50	
12-02	Bought	55	AVON PRODUCTS INC	35.1640	1,934.02	
03-24	Bought	150	BAKER HUGHES INC	23.2500	3,487.50	
12-16	Bought	55	BAKER HUGHES INC	17.8067	979.37	
03-15	Bought	50	BANK ONE CORP	56.4375	2,821.88	
03-15	Bought	40	BANKAMERICA CORP NEW	71.2500	2,850.00	
03-15	Bought	45	BRISTOL MYERS SQUIBB CO	62.9375	2,832.19	
11-18	Bought	55	BURLINGTON RESOURCES INC	36	1,980.00	
10-27	Bought	5	CHUBB CP	50.5442	252.72	
03-15	Bought	45	CITIGROUP INC	63.4375	2,854.69	
12-21	Bought	95	COMPAQ COMPUTER CORP	25.3750	2,410.63	
08-13	Received	147	CONOCO INC CL B			TENDER DISTRIBUTION FOR DUPONT TENDER
08-26	Bought	55	DANA CORP	43.5934	2,397.64	
02-26	Bought	150	DEL MONTE FOODS COMPANY	14 3/16	2,128.13	
03-15	Bought	50	DU PONT EI DE NEMOURS & CO	57.3750	2,868.75	
08-03	Received	50	DU PONT EXCHANGE INTO CONOCO			TENDER
07-21	Bought	30	ELI LILLY & CO	76.1875	2,285.63	
06-11	Bought	10	ELI LILLY & CO	63.1875	631.88	
03-15	Bought	50	EMERSON ELECTRIC CO	58.5625	2,928.13	
04-16	Bought	50	ENRON CORP	65.0803	3,254.02	
12-01	Received	26	EXXON MOBIL CORP			EXCHANGE
03-15	Bought	40	FANNIE MAE	73	2,920.00	
02-12	Bought	125	FORE SYSTEMS INC	15.9375	1,992.19	
03-15	Bought	25	GENERAL ELECTRIC CO	105.6875	2,642.19	
05-15	Bought	80	GOODRICH B F CO	35.3125	2,825.00	
09-23	Bought	20	GOODRICH B F CO	32.0823	641.65	
03-15	Bought	45	GTE CORP	61.4375	2,764.69	
04-20	Bought	100	HERCULES INC	30.9430	3,094.30	
03-15	Bought	40	HEWLETT PACKARD	68.4375	2,737.50	
03-15	Bought	40	HONEYWELL INC	73.6250	2,945.00	
12-02	Received	56	HONEYWELL INTERNATIONAL INC			EXCHANGE

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THE HONORABLE NICK JOE RAHALL II
AGENT: MSDW ADVISORS

Account Number FA
642 122048 022

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-15	Bought	45	HOUSEHOLD INTL INC	45.4375	2,053.44	
12-21	Bought	25	INTEL CORP	80	2,000.00	
12-13	Bought	35	INTERNATIONAL PAPER CO	54.1414	1,894.95	
03-15	Bought	15	INTL BUSINESS MACHINES CORP	181.7500	2,726.25	
03-15	Bought	60	KIMBERLY CLARK CORP	49.1250	2,947.50	
03-15	Bought	20	MOBIL CORP DELAWARE	91.0625	1,821.25	
03-15	Bought	75	PEPSICO INC NC	38	2,850.00	
07-02	Bought	20	PEPSICO INC NC	38.1875	763.75	
03-15	Bought	90	PG&E CORPORATION	31.9375	2,874.38	
04-05	Bought	50	PITNEY BOWES INC	63.6404	3,184.02	
10-29	Bought	15	PITNEY BOWES INC	47.9375	719.06	
04-01	Bought	15	PROVIDIAN FINCL CORP	84.5488	1,268.23	
06-03	Bought	15	PROVIDIAN FINCL CORP	92.5000	1,387.50	
06-10	Bought	15	PROVIDIAN FINCL CORP	76.7407	1,151.11	
10-04	Bought	10	RAYTHEON CO (NEW) CLB	48.9264	489.26	
03-15	Bought	70	RITE AID CORP	38.1250	2,668.75	
03-17	Bought	60	RITE AID CORP	24	1,440.00	
03-18	Bought	15	RITE AID CORP	24.1250	361.88	
08-10	Bought	30	RITE AID CORP	19.8125	594.38	
03-15	Bought	55	SBC COMMUNICATIONS	51.7500	2,846.25	
03-15	Bought	50	SCHERING PLOUGH CORP	56.1250	2,806.25	
10-05	Bought	20	SCHERING PLOUGH CORP	42.9781	859.56	
09-27	Bought	30	SEAGRAM CO LTD	46.5000	1,395.00	
10-25	Bought	15	SEAGRAM CO LTD	38.8699	583.05	
10-29	Bought	25	SEAGRAM CO LTD	45.6250	1,140.63	
10-07	Bought	10	SPRINT CORP (FON GROUP)	40.5000	405.00	
11-05	Bought	35	TYCO INTERNATIONAL LTD NEW	39.5625	1,384.69	
11-05	Bought	40	TYCO INTERNATIONAL LTD NEW	38.9375	1,557.50	
03-15	Bought	20	UNITED TECHNOLOGIES CORP	125.6250	2,512.50	
03-15	Bought	85	USX MARATHON GP	22.8750	1,944.38	
03-15	Bought	40	WARNER LAMBERT CO	70.8125	2,832.50	
09-08	Bought	50	WEYERHAEUSER CO	57.6182	2,880.91	
03-15	Bought	85	WILLIAMS CO INC	35.1875	2,990.94	
02-08	Bought	100	WORLD COLOR PRESS INC	24 1/8	2,412.50	
03-15	Bought	50	XEROX CORP	55.1250	2,756.25	
			Total Funds to Purchase Securities		142,396.78	

Other Debits

Date	Activity	Description	Amount	Additional Information
01-20	Charge	VISION 1099 FEE	-345.45	
03-01	Charge	VISION 1099 ADVFEE-EAG	-250.00	
03-04	Charge	VISION FEE REV	-247.69	

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II AS CUST FOR NICK JOE RAHALL III UNDER THE WV GIFTS TO MINORS ACT	REP ACCOUNT BK08 6540-0350 TAXPAYER ID: 233-17-4890	PAGE 2 OF 3

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE.
IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.
ISSUE DATE: 01/19/00

PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
LASON INC CUSIP: 51808R107	06/17/99	SALE	200.00	39.0000	$7,686.50
MFS I NEW DISCOVERY CL B CUSIP: 552983546	12/03/99	SALE	748.63	19.1200	$13,903.90
MP3 COM INC CUSIP: 62473M109	11/02/99	SALE	200.00	54.2500	$10,663.88
PHILIP MORRIS COMPANIES CUSIP: 718154107	06/10/99	SALE	300.00	41.8750	$12,328.60
PRODIGY COMMUNICATIONS CUSIP: 74283P107	12/03/99	SALE	300.00	28.1250	$8,310.47
SIRIUS SATELLITE RADIO CUSIP: 82966U103	12/27/99	SALE	100.00	35.8750	$3,483.57
US SEARCH CORP COM CUSIP: 903404101	09/13/99	SALE	500.00	11.3750	$5,552.87
WINK COMMUNICATIONS INC CUSIP: 974168106	09/29/99	SALE	100.00	43.1250	$4,229.17
WINK COMMUNICATIONS INC CUSIP: 974168106	10/22/99	SALE	300.00	34.6250	$10,265.74
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	06/10/99	SALE	100.00	38.2500	$3,743.01
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	11/18/99	SALE	300.00	31.0000	$9,122.69
TOTAL PROCEEDS					$89,290.40

IRS BOX	1099-B -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-B, OMB NO. 1545-0715	
2.	GROSS PROCEEDS LESS COMMISSIONS ON STOCK, BONDS, ETC	$89,290.40
4.	FEDERAL INCOME TAX WITHHELD	$0.00

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II AS CUST FOR	REP ACCOUNT	PAGE
NICK JOE RAHALL III UNDER THE	BK08 6540-0350	3 OF 3
WV GIFTS TO MINORS ACT	TAXPAYER ID: 233-17-4890	

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

ISSUE DATE: 01/19/00

THIS SECTION CONTAINS PURCHASE ACTIVITY IN YOUR ACCOUNT.
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DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
AT HOME CORP CUSIP: 045919107	12/15/99	PURCHASE	100.00	50.7500	$5,177.40
AT HOME CORP CUSIP: 045919107	12/22/99	PURCHASE	100.00	45.7500	$4,680.58
LASON INC CUSIP: 51808R107	06/11/99	PURCHASE	200.00	37.2500	$7,604.75
LIBERTY FDS TR III * CUSIP: 53054M808	12/15/99	PURCHASE	.27		$5.38
LIBERTY FDS TR III * CUSIP: 53054M808	12/15/99	PURCHASE	56.14		$1,106.09
MP3 COM INC CUSIP: 62473M109	07/23/99	PURCHASE	100.00	58.7500	$5,975.00
MP3 COM INC CUSIP: 62473M109	07/29/99	PURCHASE	100.00	40.7500	$4,166.52
PHILIP MORRIS COMPANIES CUSIP: 718154107	02/11/99	PURCHASE	200.00	39.8750	$8,138.44
PHILIP MORRIS COMPANIES CUSIP: 718154107	03/31/99	PURCHASE	100.00	34.6250	$3,552.35
PRODIGY COMMUNICATIONS CUSIP: 74283P107	03/23/99	PURCHASE	200.00	37.4375	$7,647.57
PRODIGY COMMUNICATIONS CUSIP: 74283P107	04/29/99	PURCHASE	100.00	28.1875	$2,899.03
SIRIUS SATELLITE RADIO CUSIP: 82966U103	12/01/99	PURCHASE	200.00	26.8750	$5,525.63
SIRIUS SATELLITE RADIO CUSIP: 82966U103	12/03/99	PURCHASE	100.00	26.8125	$2,763.15
US SEARCH CORP COM CUSIP: 903404101	07/29/99	PURCHASE	500.00	10.1250	$5,210.98
VK PACE FUND CL B * CUSIP: 92113N209	12/17/99	PURCHASE	20.08		$264.87
VK PACE FUND CL B * CUSIP: 92113N209	12/17/99	PURCHASE	112.54		$1,484.44
WINK COMMUNICATIONS INC CUSIP: 974168106	09/28/99	PURCHASE	100.00	39.0000	$3,982.80
WINK COMMUNICATIONS INC CUSIP: 974168106	10/04/99	PURCHASE	100.00	39.7500	$4,054.17
WINK COMMUNICATIONS INC CUSIP: 974168106	10/05/99	PURCHASE	100.00	37.2500	$3,813.49
WINK COMMUNICATIONS INC CUSIP: 974168106	10/14/99	PURCHASE	100.00	28.7500	$2,956.13
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	06/04/99	PURCHASE	100.00	34.2500	$3,509.30
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	07/23/99	PURCHASE	100.00	41.1250	$4,206.40
WORLDGATE COMMUNICATIONS CUSIP: 98156L307	10/15/99	PURCHASE	200.00	22.0000	$4,525.68

93,220.15

Attachment 23

SALOMON SMITH BARNEY

A member of citigroup

Corrected Copy as of 02/07/00
Ref: 000006626 00007563

Select Client Statement
1999 Year End Summary

N JOE RAHALL II ACF
Account Number 685-00725-10 025 SS # 233-17-4890

Details of Long Term Gain (Loss) 1999

This section shows your sales of securities during the year. The "Sale Proceeds" column excludes any accrued income you may have received. Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Reference number	Quantity	Security Description	Opening Trade Date	Closing Trade Date	Sale Proceeds	Cost	(Loss)	Gain
125000100	600	LEUCADIANATIONALCORP GENERATED- CIN AS OF 05/22/99	06/01/95	05/22/99	$ 7,200.00	$ 5,379.49		$ 1,820.51 [b]
Total					$ 7,200.00	$ 5,379.49		$ 1,820.51

[b] *Based on information supplied by your Financial Consultant.*

Details of Deposits and Withdrawals 1999

This section reflects any deposits or withdrawals made to your account during the year.

Withdrawals

Reference number	Date	Description	Referral number	Amount
220000100	03/19/99	INVESTMENT & ADVISORY SERVICES FROM 03/01/99 TO 05/31/99		$ 549.95
220000300	09/17/99	INVESTMENT & ADVISORY SERVICES FROM 09/01/99 TO 11/30/99		535.99
Total				$ 2,174.86

Reference number	Date	Description	Referral number	Amount
220000200	06/18/99	INVESTMENT & ADVISORY SERVICES FROM 06/01/99 TO 08/31/99		$ 545.04
220000400	12/17/99	INVESTMENT & ADVISORY SERVICES FROM 12/01/99 TO 02/29/00		$43.88

1999 YEAR END SUMMARY

FIRST CLEARING CORPORATION 1999

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II AS CUST FOR	REP ACCOUNT	PAGE
SUZANNE NICOLE RAHALL UNDER	BK08 6540-1050	3 OF 4
THE WV GIFTS TO MINORS ACT	TAXPAYER ID: 233-25-9977	

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

CORRECTION: 03/10/00

PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
ADVANCED FIBRE	09/30/99	SALE	100.00	22.1875	$2,162.67
CUSIP: 00754A105					
COLUMBIA/HCA HLTH CARE	11/16/99	SALE	200.00	26.3750	$5,189.64
CUSIP: 197677107					
COLUMBIA/HCA HLTH CARE	05/11/99	CASH IN LIEU			$12.33
CUSIP: 197677107					
FNMA 91 6ZD 9.01/25/21	12/25/99	PRINCIPAL	3,000.00		$1,732.58
CUSIP: 31358FZB8					
FNMA 92 11E 8 12/25/21	12/25/99	PRINCIPAL	3,000.00		$901.79
CUSIP: 31358LBZ8					
LIFEPOINT HOSPS INC	08/04/99	SALE	10.00	9.3750	$87.74
CUSIP: 53219L109					
MFS RESEARCH FD CL B	12/15/99	SALE	389.03	25.8500	$10,056.50
CUSIP: 552981201					
MRV COMMUNICATIONS INC	09/10/99	SALE	100.00	23.3125	$2,275.17
CUSIP: 553477100					
MSC K3 8.425%09/20/18	12/20/99	PRINCIPAL	3,000.00		$487.41
CUSIP: 617909AD8					
MST CMO SER 15 M 3/20/24	12/20/99	PRINCIPAL	5,000.00		$1,384.90
CUSIP: 618901375					
PHYCOR INC	10/22/99	SALE	500.00	1.7812	$883.60
CUSIP: 71940F100					
TRIAD HOSPS INC	08/04/99	SALE	10.00	10.0000	$93.99
CUSIP: 89579K109					
VK COMSTOCK FD CL B	12/08/99	SALE	492.15	15.7700	$7,601.28
CUSIP: 92112D202					
TOTAL PROCEEDS					$32,869.60

IRS BOX 1099-B -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-B, OMB NO. 1545-0715	
2. GROSS PROCEEDS LESS COMMISSIONS ON STOCK, BONDS, ETC	$32,869.60
4. FEDERAL INCOME TAX WITHHELD	$0.00

FIRST CLEARING CORPORATION 1999 24 – p.2

FIRST UNION SECURITIES, INC.
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK JOE RAHALL II AS CUST FOR SUZANNE NICOLE RAHALL UNDER THE WV GIFTS TO MINORS ACT	REP ACCOUNT BK08 6540-1050 TAXPAYER ID: 233-25-9977	PAGE 4 OF 4

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

CORRECTION: 03/10/00

THIS SECTION CONTAINS PURCHASE ACTIVITY IN YOUR ACCOUNT.
IT IS PROVIDED FOR YOUR INFORMATION ONLY.

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
CBRL GROUP INC CUSIP: 12489V106	01/20/99	PURCHASE	200.00	21.7500	$4,458.40
CBRL GROUP INC CUSIP: 12489V106	08/04/99	PURCHASE	100.00	14.6250	$1,518.50
COLUMBIA/HCA HLTH CARE CUSIP: 197677107	01/14/99	PURCHASE	100.00	21.4375	$2,207.26
DISNEY WALT COMPANY CUSIP: 254687106	06/11/99	PURCHASE	100.00	28.6875	$2,938.53
LIBERTY VI US G & I CL B CUSIP: 530548502	12/13/99	PURCHASE	129.73	19.2700	$2,500.00
LIBERTY FUNDS TRUST VI * CUSIP: 530548502	12/15/99	PURCHASE	32.12		$619.60
MFS RESEARCH * CUSIP: 552981201	12/14/99	PURCHASE	29.49		$769.53
MFS RESEARCH G & I CL B CUSIP: 552983827	12/14/99	PURCHASE	615.38	16.2500	$10,000.00
MASSACHUSETTS INVS CL B CUSIP: 575736202	12/15/99	PURCHASE	507.39	19.8200	$10,056.50
VK COMSTOCK FUND * CUSIP: 92112D202	03/24/99	PURCHASE	.97		$15.49
VK COMSTOCK FUND * CUSIP: 92112D202	03/24/99	PURCHASE	5.77		$92.15
VK COMSTOCK FUND * CUSIP: 92112D202	03/24/99	PURCHASE	6.80		$108.54
VK COMSTOCK FUND * CUSIP: 92112D202	06/23/99	PURCHASE	.90		$15.93
VK COMSTOCK FUND * CUSIP: 92112D202	09/22/99	PURCHASE	.99		$15.96
VK PACE FUND CL B ?* CUSIP: 92113N209	12/16/99	PURCHASE	188.96	13.2300	$2,500.00
VK PACE FUND CL B * CUSIP: 92113N209	12/17/99	PURCHASE	15.03		$198.30
VK PACE FUND CL B * CUSIP: 92113N209	12/17/99	PURCHASE	84.25		$1,111.32
					39,626.01

COLLATERALIZED DEBT OBLIGATIONS.
REAL ESTATE MORTGAGE INVESTMENT CONDUITS (REMICS) & COLL. MORTGAGE OBLIG (CMO).

DESCRIPTION	TYPE
FNMA 91 6ZD 9.01/25/21	REMIC
FNMA 92 11E 8 12/25/21	REMIC
MSC K3 8.425%09/20/18	CMO
MST CMO SER 15 M 3/20/24	REMIC
FNMA 91 6ZD 9.01/25/21	REMIC
FNMA 92 11E 8 12/25/21	REMIC

IRS REGULATIONS REQUIRE US TO PROVIDE ADDITIONAL INFORMATION TO HOLDERS OF SECURITIES CLASSIFIED AS COLLATERALIZED DEBT OBLIGATIONS.
REMIC- INCOME DERIVED FROM REMICS MUST BE REPORTED USING THE ACCRUAL METHOD OF ACCOUNTING. THIS MEANS, THE INTEREST APPEARING ON YOUR FORM 1099-OID/REMIC IS REPORTED ON AN ACCRUAL METHOD RATHER THAN A CASH BASIS. PER IRS REGULATIONS INCOME GENERATED BY A REMIC WILL BE REPORTED ON FORM 1099-OID/REMIC WHICH WILL BE ISSUED BY MARCH 15.
CMO- A STATEMENT OF ADDITIONAL INFORMATION WHICH IS HELPFUL IN DETERMINING THE AMORTIZATION OF MARKET DISCOUNT, MARKET PREMIUM OR BOND PREMIUM WILL BE ISSUED BY MARCH 15.

Attachment 25

MORGAN STANLEY DEAN WITTER

ACTIVE ASSETS ACCOUNT®
FOR YEAR ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
PRIVATE & CONFIDENTIAL

Account Number 642 115916 FA 022

Deposits

Date	Activity	Description	Amount	Additional Information
11-09	Transfer	FUNDS TRANSFERRED	5,000.00	PER LETTER OF AUTHORIZATION FROM 642-106660-0
		Total Deposits	5,000.00	

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
11-23	Sold	200	AGILENT TECHNOLOGIES	48 7/8	9,574.11	
11-18	Sold	100	UNITED PARCEL SERVICE INC CL-B	67 3/4	6,665.42	
			Total Sales Proceeds/Redemptions		16,241.53	

Total Credits To Your Account 21,241.53

DEBITS TO YOUR ACCOUNT

Checking

Date Written	Date Paid	Check #	Payee	Amount	Expense Category
05-24	05-25	0134	SAFEWAY	97.42	No Code
			Total Checking	97.42	

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
11-23	Bought	200	AGILENT TECHNOLOGIES	30	6,000.00	
11-15	Bought	100	UNITED PARCEL SERVICE INC CL-B	50	5,000.00	
			Total Funds to Purchase Securities		11,000.00	

Other Debits

Date	Activity	Description	Amount	Additional Information
04-05	Charge	AAA ANNUAL SERVICE FEE	-80.00	
		Total Other Debits	-80.00	

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

Attachment 26 - p.1

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING MARCH 31, 1999

NICK JOE RAHALL II
1301 DELAWARE AVENUE SW #409N

Account Number 642 115917 FA 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
03-15	Dividend	ARM FINCL GP INC CLASS A	4.00	Stocks
03-31	Dividend	MSDW LIQUID ASSET FUND	45.01	Money Market Funds
		Total Dividends and Interest	49.01	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-01	Sold	100	MMD/AMAT 6% PERQS 6000 08MY15	44 1/2	4,560.02	
			Total Sales Proceeds/Redemptions		4,560.02	Year To Date 5,560.02

Total Credits To Your Account 4,609.03 Year To Date 4,871.40

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
03-05	Bought	200	DOMINION RESOURCES INC VA	39 3/16	7,983.19	
			Total Funds to Purchase Securities		7,983.19	Year To Date 7,983.19

Other Debits

Date	Activity	Description	Amount	Additional Information
03-26	Charge	ANNUAL MAINTENANCE FEE	-30.00	
		Total Other Debits	30.00	Year To Date 30.00

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING APRIL 30, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number FA
842 115917 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
04-15	Dividend	HOUSEHOLD INTL INC	74.50	Stocks
04-30	Dividend	MSDW LIQUID ASSET FUND	20.36	Money Market Funds
		Total Dividends and Interest	94.86	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Total Credits To Your Account 494.86 Year To Date 84,969.26

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
04-06	Bought	250	PEPSI BOTTLING GROUP INC	23	5,750.00	
			Total Funds to Purchase Securities		-5,750.00	Year To Date -13,733.19

Total Debits To Your Account -5,750.00 Year To Date -13,763.19

ADDITIONAL ACCOUNT INFORMATION

Money Market

Date	Activity	Description	Amount	Additional Information
		Closing Balance 3/31	10,379.25	
04-04	Automatic Redemption	MSDW LIQUID ASSET FUND	-5,750.00	
04-16	Automatic Investment	MSDW LIQUID ASSET FUND	76.50	
04-30	Dividend Reinvestment	MSDW LIQUID ASSET FUND	20.36	
		Closing Balance 4/30	4,726.11	

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING MAY 31, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number 642 115917 FA 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
05-14	Dividend	LASALLE HOTEL PROPERTIES	37.50	Stocks
05-27	Dividend	MSDW LIQUID ASSET FUND	18.12	Money Market Funds
		Total Dividends and Interest	$55.62	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information	
05-18	Sold	200	GESTIA COMMUNICATIONS INC	14	2,701.57		
05-18	Sold	100	COPPER MOUNTAIN	67 1/8	4,482.92		
05-21	Sold	200	HOUSEHOLD INTL INC	44 13/16	8,810.28		
			Total Sales Proceeds/Redemptions		16,114.77	Year To Date	22,575.41

Total Credits To Your Account 16,170.41 Year To Date 23,130.67

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information	
05-11	Bought	200	GESTIA COMMUNICATIONS INC	10	2,000.00		
05-18	Bought	100	COPPER MOUNTAIN	21	2,100.00		
05-25	Bought	125	CLEAR CHANNEL COMMUNICATION	79 5/8	9,829.13		
05-28	Bought	500	TC PIPELINES LP	20.5000	10,250.00		
			Total Funds to Purchase Securities		23,170.15	Year To Date	36,911.32

Total Debits To Your Account 23,170.15 Year To Date 36,911.32

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING JUNE 30, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number 642 115017 FA 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
06-15	Dividend	ARM FINCL GP INC CLASS A	4.00	Stocks
06-21	Dividend	DOMINION RESOURCES INC VA	129.00	Stocks
06-30	Dividend	PEPSI BOTTLING GROUP INC	5.00	Stocks
06-30	Dividend	MSDW LIQUID ASSET FUND	26.89	Money Market Funds
		Total Dividends and Interest	164.89	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information	
06-02	Sold	200	DOMINION RESOURCES INC VA	43 1/4	8,501.40		
			Total Sales Proceeds/Redemptions		8,501.40	Year To Date	31,177.01
Total Credits To Your Account					8,666.29	Year To Date	031,804.96

ADDITIONAL ACCOUNT INFORMATION

Money Market

Date	Activity	Description	Amount	Additional Information
		Closing Balance 5/31	0.00	
06-03	Automatic Investment	MSDW LIQUID ASSET FUND	8,219.79	
06-16	Automatic Investment	MSDW LIQUID ASSET FUND	4.00	
06-22	Automatic Investment	MSDW LIQUID ASSET FUND	129.00	
06-30	Dividend Reinvestment	MSDW LIQUID ASSET FUND	26.89	
		Closing Balance 6/30	8,379.68	

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING AUGUST 31, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number FA
642 115917 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
08-13	Dividend	LASALLE HOTEL PROPERTIES	38.00	Stocks
08-31	Dividend	MSDW LIQUID ASSET FUND	26.29	Money Market Funds
		Total Dividends and Interest	64.29	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
08-10	Sold	100	HOMESTORE.COM INC	22 7/8	2,210.07	
			Total Sales Proceeds/Redemptions		2,210.07	Year To Date 33,387.08

Other Credits

Date	Activity	Description	Amount	Additional Information
08-12	Distribution	TC PIPELINES LP	84.05	
		Total Other Credits	84.05	Year To Date 84.05

Total Credits To Your Account 2,358.41 Year To Date 634,236.74

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
08-10	Bought	100	HOMESTORE.COM INC	20	2,000.00	
08-12	Bought	100	COX COMMUNICATIONS CLASS A	34 11/16	3,468.75	

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING SEPTEMBER 30, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number FA
642 115917 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
09-23	Dividend	MSDW DIVIDEND GROWTH B	55.54	Mutual funds
09-30	Dividend	PEPSI BOTTLING GROUP INC	5.00	Stocks
09-30	Dividend	MSDW LIQUID ASSET FUND	6.96	Money Market Funds
		Total Dividends and Interest	67.50	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Sales Proceeds/Redemptions

Date	Activity	Quantity	Description	Price	Amount	Additional Information
09-13	Sold	100	COX COMMUNICATIONS CLASS A	39 7/8	3,945.01	
09-13	Sold	100	LASALLE HOTEL PROPERTIES	13 7/8	1,345.10	
09-13	Sold	100	UNICAPITAL CORPORATION	3 1/2	327.63	
09-13	Sold	500	TC PIPELINES LP	18 7/16	9,038.48	
09-13	Sold	250	PEPSI BOTTLING GROUP INC	18 7/8	4,644.24	
09-13	Sold	125	CLEAR CHANNEL COMMUNICATION	75 3/8	9,394.21	
09-13	Sold	250	HOUSEHOLD INTL INC	39 3/8	9,853.56	
			Total Sales Proceeds/Redemptions		38,418.23	Year To Date 71,997.31

Total Credits To Your Account 938,477.73 Year To Date 972,914.47

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
09-13	Bought	617.796	MSDW AMERICAN OPPORTUNITIES B	35.5700	21,975.00	
09-13	Bought	347.102	MSDW DIVIDEND GROWTH B	63.3100	21,975.00	
09-23	Direct Purchase	.938	MSDW DIVIDEND GROWTH B	59.2000	55.54	DIVIDEND REINVESTMENT

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

MORGAN STANLEY DEAN WITTER

RETIREMENT ACCOUNT
FOR MONTH ENDING DECEMBER 31, 1999

THE HONORABLE NICK JOE RAHALL II
2307 RAYBURN HOB

Account Number 642 115917 FA 022

CREDITS TO YOUR ACCOUNT

Dividends and Interest

Date	Activity	Description	Amount	Income Category
12-16	Dividend	MSDW DIVIDEND GROWTH B	74.37	Mutual funds
12-31	Dividend	MSDW LIQUID ASSET FUND	.01	Money Market Funds
		Total Dividends and Interest	74.38	

See Income Summary on page 1 for the month to date and year to date amounts per income category.

Other Credits

Date	Activity	Description	Amount	Additional Information
12-16	L/T Capital Gain	MSDW AMERICAN OPPORTUNITIES B	472.47	
12-16	S/T Capital Gain	MSDW AMERICAN OPPORTUNITIES B	1,781.61	
12-16	L/T Capital Gain	MSDW DIVIDEND GROWTH B	526.74	
		Total Other Credits	2,780.82	Year To Date 2,844.97
		Total Credits To Your Account	2,855.20	Year To Date 975,249.62

DEBITS TO YOUR ACCOUNT

Funds to Purchase Securities

Date	Activity	Quantity	Description	Price	Amount	Additional Information
12-16	L/T Capital Gain	12.057	MSDW AMERICAN OPPORTUNITIES B	39.2500	472.47	REINVESTMENT
12-16	S/T Capital Gain	45.391	MSDW AMERICAN OPPORTUNITIES B	39.2500	1,781.61	REINVESTMENT
12-16	Direct Purchase	1.318	MSDW DIVIDEND GROWTH B	$4.4100	74.37	DIVIDEND REINVESTMENT
12-16	L/T Capital Gain	9.338	MSDW DIVIDEND GROWTH B	$4.4100	526.74	REINVESTMENT
			Total Funds to Purchase Securities		2,855.20	Year To Date 975,249.62
			Total Debits To Your Account		2,855.20	Year To Date 975,249.62

Morgan Stanley Dean Witter is a service mark of Morgan Stanley Dean Witter & Co. and services are offered through Dean Witter Reynolds Inc., member SIPC.

FIRST CLEARING CORPORATION 1999

FIRST CLEARING CORPORATION
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK RAHALL II	REP ACCOUNT	PAGE
SW APT 409N	KH03 7174-9050	2 OF 3
1301 DELWARE AVE	TAXPAYER ID: 236-78-8645	

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

ISSUE DATE: 01/19/00

PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
IRIDIUM WORLD CUSIP: G49398103	02/04/99	SALE	100.00	32.7500	$3,182.58
ALCAN ALUMINUM LTD NEW CUSIP: 013716105	02/23/99	SALE	150.00	23.5000	$3,515.13
ALCAN ALUMINUM LTD NEW CUSIP: 013716105	04/22/99	SALE	750.00	28.1875	$20,716.08
PATTERSON ENERGY INC CUSIP: 703414102	02/03/99	SALE	350.00	3.3750	$1,171.46
PATTERSON ENERGY INC CUSIP: 703414102	02/04/99	SALE	2,950.00	3.3437	$9,463.37
WINFIELD CAP CORP CUSIP: 973859101	05/07/99	SALE	15.00	31.1250	$457.11
WINFIELD CAP CORP CUSIP: 973859101	05/10/99	SALE	100.00	31.7500	$3,154.89
WINFIELD CAP CORP CUSIP: 973859101	05/10/99	SALE	50.00	31.4375	$1,542.07
WINFIELD CAP CORP CUSIP: 973859101	05/11/99	SALE	100.00	33.1250	$3,219.51
WINFIELD CAP CORP CUSIP: 973859101	05/11/99	SALE	40.00	33.0000	$1,310.20
WINFIELD CAP CORP CUSIP: 973859101	05/12/99	SALE	50.00	31.6250	$1,571.44
WINFIELD CAP CORP CUSIP: 973859101	05/14/99	SALE	145.00	31.0000	$4,355.74
TOTAL PROCEEDS					$53,659.58

IRS BOX	1099-B -- TOTALS FOR TAX YEAR 1999 SUBSTITUTE FOR IRS FORM 1099-B, OMB NO. 1545-0715	
2.	GROSS PROCEEDS LESS COMMISSIONS ON STOCK, BONDS, ETC	$53,659.58
4.	FEDERAL INCOME TAX WITHHELD	$0.00

FIRST CLEARING CORPORATION 1999

FIRST CLEARING CORPORATION
10700 WHEAT FIRST DRIVE
GLEN ALLEN, VA 23060

FEDERAL ID. NO: 23-2384840

NICK RAHALL II	REP ACCOUNT	PAGE
SW APT 409N	KH03 7174-9050	3 OF 3
1301 DELWARE AVE	TAXPAYER ID: 236-78-8645	

THE FOLLOWING IS BEING PROVIDED FOR YOUR INFORMATION ONLY AND WILL NOT BE FURNISHED TO THE INTERNAL REVENUE SERVICE.

ISSUE DATE: 01/19/00

THIS SECTION LISTS MISCELLANEOUS INFORMATION WHICH CAN BE HELPFUL IN THE PREPARATION OF YOUR TAX RETURN. IT LISTS NON FEDERALLY REPORTABLE INCOME WHICH MAY OR MAY NOT BE TAXABLE AT THE STATE OR LOCAL LEVEL. PLEASE REVIEW THIS INFORMATION WITH YOUR TAX ADVISOR.

DESCRIPTION	ACTIVITY	AMOUNT	REF@#
MARGIN DEBIT INTEREST	MARGIN INTEREST	$371.27DR	1

REF # -- TOTALS FOR TAX YEAR 1999
MISCELLANEOUS INFORMATION TOTALS

1. MARGIN DEBIT INTEREST	$371.27DR
2. FEDERALLY TAX EXEMPT MUNICIPAL BONDS	$0.00
3. FEDERALLY TAX EXEMPT DIVIDENDS	$0.00
4. NOT USED AT THIS TIME	$0.00
5. INCOME SUBJECT TO ALTERNATIVE MINIMUM TAX	$0.00
6. FEDERALLY TAX EXEMPT INTEREST	$0.00
7. FEDERALLY TAX EXEMPT ACCRUED INTEREST	$0.00
8. MASTER LIMITED PARTNERSHIP DISTRIBUTIONS	$0.00
9. ACCRUED INTEREST ON PURCHASES	$0.00DR

THIS SECTION CONTAINS PURCHASE ACTIVITY IN YOUR ACCOUNT.
IT IS PROVIDED FOR YOUR INFORMATION ONLY.

DESCRIPTION	DATE	ACTIVITY	QUANTITY	PRICE	AMOUNT
ALCAN ALUMINUM LTD NEW CUSIP: 013716105	02/04/99	PURCHASE	600.00	25.7500	$15,770.61
ALCAN ALUMINUM LTD NEW CUSIP: 013716105	02/05/99	PURCHASE	300.00	26.6875	$8,194.06
WINFIELD CAP CORP CUSIP: 973859101	04/22/99	PURCHASE	500.00	45.3750	$23,086.78

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

RECEIVED
[illegible] ARCHIVE INTAKE CENTER
00 MAY 12 PM 1:39
[illegible]
(5)
HAND DELIVERED
(Office Use Only)

JAMES MARVIN RAMSTAD
(Full Name)

2618 CROSBY ROAD
(Mailing Address)

WAYZATA, MINNESOTA 55391

Daytime Telephone (202) 225-2871

Filer Status	[X] Member of the U S House of Representatives	State Minnesota District Third	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [X]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [X]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [X]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [X]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [X]	No [ ]
VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [X]
VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [ ]	No [X]
VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [X]	No [ ]
IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Jim M. Ramstad	5-12-00

3665

Name JAMES MARVIN RAMSTAD

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income), any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

	Block A		Block B: A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	Block C: DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	Block D: I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	Block E: P, S, E
SP, DC, JT	Examples:	SP	Mega Corp. Stock					X							X																		P
			Simon & Schuster		Indefinite																Royalties									X			
			1st Bank of Paducah, KY accounts						X								X									X							
	Woodworth Farmers Group				X										X								X										
	Legislative Retirement Plan			*		X																											
	* No Income Derived																																

For additional assets and unearned income, use next page.

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name JAMES MARVIN RAMSTAD

SP, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset												BLOCK C Type of Income							BLOCK D Amount of Income											BLOCK E Transaction
		A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
	Farm property - No.Dakota, Total of 960 acres (no improvements) and undivided one-half interest in parcels totaling 800 acres (one parcel with farm bldgs.)								X						X												X	(Gross & Net)				

This page may be copied if more space is required.

Name JAMES MARVIN RAMSTAD

SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. **Exclude:** Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Wells Fargo Bank, Minneapolis, MN	Personal Loan		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Advisory Board Member	Lake Country Food Bank
Board Member	Minnesota D.A.R.E.

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
	NONE	

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1999

FORM A
For use by Members, officers, and employees

00 MAY 26 PM 4:44

(5)

Charles Bernard Rangel
(Full Name)

2354 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone

MC HAND DELIVERED
(Office Use Only)

Filer Status	[XX] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

A *$200 penalty* shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of $200 or more from any source in the reporting period? **If yes, complete and attach Schedule I.**	Yes [ ]	No [XX]	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $260 and not otherwise exempt)? **If yes, complete and attach Schedule VI.**	Yes [ ]	No [XX]
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, complete and attach Schedule II.**	Yes [ ]	No [XX]	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $260 from one source)? **If yes, complete and attach Schedule VII.**	Yes [XX]	No [ ]
III. Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, complete and attach Schedule III.**	Yes [XX]	No [ ]	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, complete and attach Schedule VIII.**	Yes [XX]	No [ ]
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding $1,000 during the reporting period? **If yes, complete and attach Schedule IV.**	Yes [ ]	No [XX]	IX. Did you have any reportable agreement or arrangement with an outside entity? **If yes, complete and attach Schedule IX.**	Yes [ ]	No [XX]
V. Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, complete and attach Schedule V.**	Yes [XX]	No [ ]	**Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.**		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil penalties and criminal sanctions (*See* 5 U.S.C. app. 4, § 104 and 18 U.S.C. §1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	C B Rangel	May 22, 2000

3670

SCHEDULE III — ASSETS AND "UNEARNED" INCOME

BLOCK A — Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding $1,000 at the end of the reporting period, and (b) any other asset or source of income which generated more than $200 in "unearned" income during the year. For rental property or land, provide an address. Provide full names of any mutual funds. For a self-directed IRA (i.e., one where you have the power to select the specific investments), provide information on *each asset* in the account that exceeds the reporting threshold, and the income earned for the account. For an IRA or retirement plan that is not self-directed, name the institution holding the account and provide its value at the end of the reporting period. For an active business that is not publicly traded, in Block A state the nature of the business and its geographic location. For additional information, see the instruction booklet for the reporting year.

Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits totaling $5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.

If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.

BLOCK B — Value of Asset

at close of reporting year.
If you use a valuation method other than fair market value, please specify the method used.
If an asset was sold and is included only because it generated income, the value should be "None."

BLOCK C — Type of Income

BLOCK D — Amount of Income

For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income.

BLOCK E — Transaction

Indicate if asset was purchased (P), sold (S), or exchanged (E) in reporting year.

SP, DC, JT	Block A	A None	B $1 – $1,000	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	I $1,000,001 – $5,000,000	J $5,000,001 – $25,000,000	K $25,000,001 – $50,000,000	L Over $50,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Type of Income (Specify: For Example, Partnership Income or Farm Income)	I None	II $1 – $200	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	X $1,000,001 – $5,000,000	XI Over $5,000,000	P, S, E
SP	Examples: Mega Corp. Stock					X								X										X									P
DC	Examples: Simon & Schuster		Indefinite																	Royalties									X				
JT	Examples: 1st Bank of Paducah, KY accounts						X									X									X								
	74 West 132nd St, NY, NY					XX															XX												
	Punta Cana Beach Villa, Dom Rep					XX															XX												
	New England Mutual Life Boston, MA				XX																												

For additional assets and unearned income, use next page.

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SCHEDULE V — LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report ***revolving charge accounts*** only if the balance at the close of the preceding calendar year exceeded $10,000.

SP, DC, JT	Creditor	Type of Liability	Amount of Liability									
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H $1,000,001–$5,000,000	I $5,000,001–$25,000,000	J $25,000,001–$50,000,000	K Over $50,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 123 Main St., Dover, Del.				X						
	Citibank, New York, NY	mortgage on 74 W 132nd St New York, NY			XX							
	Punta Cana Beach Villa, Dom Rep	mortgage on Punta Cana condo		X								

SCHEDULE VI — GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $260 received by you, your spouse, or a dependent child from any source during the year.

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of $100 or less need not be added towards the $260 disclosure threshold.

Note: The gift rule (House Rule 26, clause 5) prohibits gifts except as specifically provided in the rule.

Source	Description	Value
Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)	$270

Use additional sheets if more space is required.

SCHEDULE VII —TRAVEL PAYMENTS AND REIMBURSEMENTS

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than $260 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

	Source	Date(s)	Point of Departure—Destination—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	N	N	N
	Roycroft Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Y	4 Days
	Dominican-American National Roundtable	May 29	New York - Rhode Island - Washington	N	N	N	N
	Federation of Korean Industries	Aug. 26 - 31	New York - Seoul - New York	Y	Y	N	N
	New York Carib News	Oct. 15 - 17	Wash. D.C. - St. Croix - LaGuardia	Y	Y	Y	N
	Congressional Black Caucus Foundation	Nov. 6	Wash. D.C. - North Carolina - New York	N	N	N	N
	Puerto Rico Hospital Assn.	Nov. 13 - 14	New York - Puerto Rico - New York	Y	Y	Y	N
	Preventive Medicine Research Institute	Sept. 2 - 14	New York - San Francisco New York	Y	Y	Y	N

This page may be copied if more space is required.

SCHEDULE VIII — POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States.

Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Chairman of the Board	Apollo Theatre Foundation
Board Member	Harlem Community Development Corporation

SCHEDULE IX — AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement

GPO: 2000 62-753 (mac)

Use additional sheets if more space is required.

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